

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Forward Together PAC

ADDRESS (number and street) 201 North Union St. Suite 350

Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER CITY STATE ZIPCODE

C00412791

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On: Feb 20 (M2) X May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12G)

Election on in the State of

(d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 04 01 2006 through 04 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gerald S. McGowan

Signature of Treasurer Electronically Filed by Gerald S. McGowan Date 06 26 2006

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

|                 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Forward Together PAC

Report Covering the Period: From: 

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

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

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
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 To: 

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| 3 | 0 |

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

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |            |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|------------|
| 6. (a) Cash on Hand<br>January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 6 |  | 2492527.66 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |            |
| 2   | 0                       | 0                                 | 6 |   |   |   |   |   |  |            |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 3242110.37              |                                   |   |   |   |   |   |   |  |            |
| (c) Total Receipts (from Line 19) .....   | 677606.54               | 2527777.52                        |   |   |   |   |   |   |  |            |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 3919716.91              | 5020305.18                        |   |   |   |   |   |   |  |            |
| 7. Total Disbursements (from Line 31) .....   | 462300.43               | 1562888.70                        |   |   |   |   |   |   |  |            |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 3457416.48              | 3457416.48                        |   |   |   |   |   |   |  |            |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |            |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |   |   |   |   |   |   |  |            |

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Forward Together PAC

Report Covering the Period: From: 

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

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

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

 To: 

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

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

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

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 650842.59                     | 2453947.72                        |
| (i) Itemized (use Schedule A) .....  | 5544.00                       | 34654.07                          |
| (ii) Unitemized .....  | 656386.59                     | 2488601.79                        |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 6000.00                       | 23000.00                          |
| (c) Other Political Committees (such as PACs) .....  | 662386.59                     | 2511601.79                        |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     |                               |                                   |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 370.01                            |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 15219.95                      | 15805.72                          |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 677606.54                     | 2527777.52                        |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 677606.54                     | 2527777.52                        |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| <b>II. DISBURSEMENTS</b>  | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---|---------------------------------------|---|
| 21. Operating Expenditures:   |                                       |   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                      |                                       |   |
| (i) Federal Share.....  | 0.00                                  | 0.00                                      |
| (ii) Non-Federal Share.....   | 0.00                                  | 0.00                                      |
| (b) Other Federal Operating Expenditures.....   | 462200.43                             | 1286988.70                                |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                           | 462200.43                             | 1286988.70                                |
| 22. Transfers to Affiliated/Other Party Committees.....   | 0.00                                  | 0.00                                      |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....          | 0.00                                  | 213700.00                                 |
| 24. Independent Expenditure (use Schedule E) .....  | 0.00                                  | 0.00                                      |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....  | 0.00                                  | 0.00                                      |
| 26. Loan Repayments Made.....   | 0.00                                  | 0.00                                      |
| 27. Loans Made.....   | 0.00                                  | 0.00                                      |
| 28. Refunds of Contributions To:  |                                       |   |
| (a) Individuals/Persons Other Than Political Committees .....                                   | 100.00                                | 200.00                                    |
| (b) Political Party Committees .....  | 0.00                                  | 1000.00                                   |
| (c) Other Political Committees (such as PACs) .....   | 0.00                                  | 0.00                                      |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                            | 100.00                                | 1200.00                                   |
| 29. Other Disbursements.....  | 0.00                                  | 61000.00                                  |
| 30. Federal Election Activity (2 U.S.C 431(20))   |                                       |   |
| (a) Shared Federal Election Activity (from Schedule H6)   |                                       |   |
| (i) Federal Share .....   | 0.00                                  | 0.00                                      |
| (ii) "Levin" Share .....  | 0.00                                  | 0.00                                      |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            | 0.00                                  | 0.00                                      |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....               | 0.00                                  | 0.00                                      |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..        | 462300.43                             | 1562888.70                                |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 462300.43                             | 1562888.70                                |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 662386.59                     | 2511601.79                        |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 100.00                        | 1200.00                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 662286.59                     | 2510401.79                        |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 462200.43                     | 1286988.70                        |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 370.01                            |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 462200.43                     | 1286618.69                        |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 6 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |              |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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

NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> John A. Matos  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 151 Fox Blvd  |  | <b>Transaction ID:</b> C1314440                               |
| City State Zip Code<br>Merrick NY 11566-4004  | Amount of Each Receipt this Period<br>250.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Director                       |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Hayden D. McMillian  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 8303 Summerwood Dr  |   | <b>Transaction ID:</b> C1314490                               |
| City State Zip Code<br>McLean VA 22102-2213   | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Global Asset Manager            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Robert Jarrett Lilien  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 1200 Broadway   |   | <b>Transaction ID:</b> C1314520                               |
| City State Zip Code<br>New York NY 10001-4306   | Amount of Each Receipt this Period<br>2500.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>President/COO                   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00           |   |

|  |         |
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| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 7 / 197                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                     |  |  |
|---|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Jack Rovner  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 113 E 55th St   |                                     | Transaction ID: C1314710                                 |  |
| City<br>New York  | State<br>NY                         | Amount of Each Receipt this Period<br>1000.00            |  |
| Zip Code<br>10022-3502  |                                     |  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                     |  |  |
| Name of Employer<br>Vector II Management  | Occupation<br>Consultant            |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |  |  |

|   |                                     |  |  |
|---|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Deborah Ramirez  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 3 Carol Ln  |                                     | Transaction ID: C1314720                                 |  |
| City<br>Lexington   | State<br>MA                         | Amount of Each Receipt this Period<br>1000.00            |  |
| Zip Code<br>02420-4405  |                                     |  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                     |  |  |
| Name of Employer<br>Northeastern Law School   | Occupation<br>Attorney              |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |  |  |

|   |                                     |  |  |
|---|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> John Caplan  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 617 W End Ave<br>15-B   |                                     | Transaction ID: C1314740                                 |  |
| City<br>New York  | State<br>NY                         | Amount of Each Receipt this Period<br>1000.00            |  |
| Zip Code<br>10024-1607  |                                     |  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                     |  |  |
| Name of Employer<br>Ford Management   | Occupation<br>President/COO         |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |  |  |

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 8 / 197                 |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

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

Mailing Address 4306 Sulgrave Road  
Suite 200

City Richmond State VA Zip Code 23221-3257

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

Name of Employer Ukrop's Super Markets Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 8 / 2 0 0 6

Transaction ID: C1314780

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Leroy Robinson

Mailing Address 28 Euclid Ave

City Maplewood State NJ Zip Code 07040-2122

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

Name of Employer Self Employed Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: C1320200

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Lucius J. Kellam, III

Mailing Address PO Box 350

City Belle Haven State VA Zip Code 23306-0350

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: C1320210

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 11000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 9 / 197                 |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Samuel P. Peabody

Mailing Address 990 5th Ave

City State Zip Code  
New York NY 10021-0141

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: C1312550

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Gabriel E. Gore

Mailing Address 5066 Westminster Pl

City State Zip Code  
Saint Louis MO 63108-1119

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

Name of Employer Bryan Cave, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2006

Transaction ID: C1315090

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Kevin M. Abel

Mailing Address 4637 Pershing Pl

City State Zip Code  
Saint Louis MO 63108-1907

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

Name of Employer Bryan Cave, LLP Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2006

Transaction ID: C1315100

Amount of Each Receipt this Period  
1500.00

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 10 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Susan M. Pettersen

Mailing Address 60 Riverside Drive  
Apartment 16C

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
E\*Trade Financial Director, Global Events

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

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

**Transaction ID:** C1313150

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Gregory M Gallo

Mailing Address 572 Ringwood Ave

City State Zip Code  
Menlo Park CA 94025-2235

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

Name of Employer Occupation  
DLA Piper Rudnick Gray Cary Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

**Transaction ID:** C1315130

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Eugene R. Elrod

Mailing Address 4300 Hawthorne St NW

City State Zip Code  
Washington DC 20016-3571

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

Name of Employer Occupation  
Sidley Austin, LLP Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

**Transaction ID:** C1315150

Amount of Each Receipt this Period  
250.00

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 11 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Samuel I. Gutter

Mailing Address 8532 Scarboro Ct

City Potomac State MD Zip Code 20854-4015

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

Name of Employer Sidley Austin, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315160

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Christopher W. Savage

Mailing Address 5204 Wehawken Rd

City Bethesda State MD Zip Code 20816-3132

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

Name of Employer Cole Raywid & Braverman, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315170

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Douglas B. Weinfeld

Mailing Address 3470 39th St NW Apt B674

City Washington State DC Zip Code 20016-3765

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

Name of Employer Williams & Connolly Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315180

Amount of Each Receipt this Period  
250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 5500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 12 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Dorothy B. Cullman   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |
| Mailing Address 767 3rd Ave<br>Fl 36  |   | <b>Transaction ID:</b> C1315260                                 |
| City State Zip Code<br>New York NY 10017-2023   | Amount of Each Receipt this Period<br>5000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>N/A   | Occupation<br>Retired                         |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Phyllis F. Feder   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |
| Mailing Address 101 Central Park W  |   | <b>Transaction ID:</b> C1315270                                 |
| City State Zip Code<br>New York NY 10023-4250   | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>N/A   | Occupation<br>Homemaker                       |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Andrea N. Sehl   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |
| Mailing Address 6 W 77th St<br># 10-B   |   | <b>Transaction ID:</b> C1315280                                 |
| City State Zip Code<br>New York NY 10024-5125   | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>The Varian Group  | Occupation<br>Management Consultant           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 13 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
James P. Craig, III

Mailing Address 1030 Rustling Oaks Drive

City State Zip Code  
Charlottesville VA 22901-8000

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

Name of Employer Opportunity Capital, LLC Occupation Investment Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: C1315350

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 460 El Arroyo Rd

City State Zip Code  
Hillsborough CA 94010-6669

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

Name of Employer Hillspen Capital Occupation Money Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C1315430

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
John A. Chriss

Mailing Address 5010 Greenbriar Dr

City State Zip Code  
Corpus Christi TX 78413-2720

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

Name of Employer N/A Occupation Student

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

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

Transaction ID: C1315770

Amount of Each Receipt this Period  
1250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 7250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 14 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Robin Landy Amadon

Mailing Address 518 N 64th St

City State Zip Code  
Seattle WA 98103-5630

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

Name of Employer  
Self Employed

Occupation  
Venture Capitalist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: C1315790

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Brian M. Hughes

Mailing Address 59 Clover Ln

City State Zip Code  
Princeton NJ 08540-4046

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

Name of Employer  
Mercer County

Occupation  
Mercer County Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: C1320180

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Edward L. Bridge

Mailing Address 9 Brook Bay Rd

City State Zip Code  
Mercer Island WA 98040-4621

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

Name of Employer  
Ben Bridge Jeweler, Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3333.67

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

Transaction ID: C1315900

Amount of Each Receipt this Period  
2500.00

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 15 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Charles H. Foster, Jr.   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6 |   |
| Mailing Address 13711 Hickory Nut Pt  |                                     | Transaction ID: C1315910  |   |
| City<br>Midlothian  | State<br>VA                         | Zip Code<br>23112-4939  | Amount of Each Receipt this Period<br>5000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     |   |   |
| Name of Employer<br>LandAmerica Financial Group, Inc.   | Occupation<br>Chairman              |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |   |

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> George B. Clarke, IV   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |   |
| Mailing Address 927 Holladay Pt   |                                     | Transaction ID: C1316250  |   |
| City<br>Virginia Beach  | State<br>VA                         | Zip Code<br>23451-3912  | Amount of Each Receipt this Period<br>5000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     |   |   |
| Name of Employer<br>Mid-Eastern Builders  | Occupation<br>President             |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |   |

|   |                                    |   |  |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Reid C. Adams, Jr.   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |  |
| Mailing Address 6121 Roxbury Ct   |                                    | Transaction ID: C1316260  |  |
| City<br>Kernersville  | State<br>NC                        | Zip Code<br>27284-8606  | Amount of Each Receipt this Period<br>500.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                    |   |  |
| Name of Employer<br>Self Employed   | Occupation<br>Attorney             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 10500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 16 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> G. Paul Moates   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 6 |  |
| Mailing Address 35 Oxford St  |   | <b>Transaction ID:</b> C1311970                               |  |
| City State Zip Code<br>Chevy Chase MD 20815-4230  | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Sidley & Austin, LLP  | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Abbie Gerber Eckland   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 6 |  |
| Mailing Address 7404 Radnor Road  |   | <b>Transaction ID:</b> C1311980                               |  |
| City State Zip Code<br>Bethesda MD 20817-6161   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Sidley & Austin, LLP  | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Christopher Amato  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 6 |  |
| Mailing Address 2607 Salt Meadow Rd   |   | <b>Transaction ID:</b> C1312000                               |  |
| City State Zip Code<br>Naperville IL 60564-4345   | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Manager                         |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 8500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 17 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |                                     |   |
|--|-------------------------------------|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Coby King<br>Mailing Address 23720 Posey Ln<br>City State Zip Code<br>West Hills CA 91304-5236<br>FEC ID number of contributing federal political committee. <b>C</b> |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6<br><b>Transaction ID:</b> C1312510<br>Amount of Each Receipt this Period<br>1000.00 |
| Name of Employer<br>Coby King Communication<br>Occupation<br>President<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                  | Aggregate Year-to-Date ▼<br>1000.00 |   |

|  |                                     |   |
|--|-------------------------------------|---|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Kirk A. Radke<br>Mailing Address 153 E 53rd St<br>FI 37<br>City State Zip Code<br>New York NY 10022-4611<br>FEC ID number of contributing federal political committee. <b>C</b> |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6<br><b>Transaction ID:</b> C1312520<br>Amount of Each Receipt this Period<br>1000.00 |
| Name of Employer<br>Kirkland & Ellis<br>Occupation<br>Attorney<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                                    | Aggregate Year-to-Date ▼<br>1000.00 |   |

|  |                                     |   |
|--|-------------------------------------|---|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>John R. Steffen<br>Mailing Address 906 Olive Street<br>Suite 600<br>City State Zip Code<br>Saint Louis MO 63101-1431<br>FEC ID number of contributing federal political committee. <b>C</b> |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6<br><b>Transaction ID:</b> C1313120<br>Amount of Each Receipt this Period<br>5000.00 |
| Name of Employer<br>Pyramid Construction<br>Occupation<br>Chairman<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  | Aggregate Year-to-Date ▼<br>5000.00 |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 18 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Ronald C. Gladney

Mailing Address 250 S Brentwood Blvd  
Apt 1H

City Clayton State MO Zip Code 63105-1675

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

Name of Employer Bartley Goffstein, LLC Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 12 / 2006

Transaction ID: C1313130

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Paul Halpern

Mailing Address 322 W 71st St

City New York State NY Zip Code 10023-3502

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

Name of Employer E\*Trade Financial Occupation Marketing Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 12 / 2006

Transaction ID: C1314331

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Nanette Phillips

Mailing Address 616 Huckleberry Rd

City Canton State GA Zip Code 30114-2117

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

Name of Employer E\*trade Financial Occupation Director, Disaster Recovery

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 12 / 2006

Transaction ID: C1314341

Amount of Each Receipt this Period  
500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 19 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Michael J Alpert   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 900 N Stuart St<br>Apt 1914   |  | <b>Transaction ID:</b> C1314431                               |
| City State Zip Code<br>Arlington VA 22203-4113  | Amount of Each Receipt this Period<br>500.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>E*Trade Financial Corp.   | Occupation<br>Finance                        |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Sunil Malik  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 900 N Randolph St<br>No. 305  |  | <b>Transaction ID:</b> C1314441                               |
| City State Zip Code<br>Arlington VA 22203-1949  | Amount of Each Receipt this Period<br>750.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Finance                        |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>750.00           |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> David C. Scott   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 2977 S Columbus St  |  | <b>Transaction ID:</b> C1314501                               |
| City State Zip Code<br>Arlington VA 22206-1413  | Amount of Each Receipt this Period<br>250.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Director                       |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 20 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Dan W. Lufkin

Mailing Address 711 5th Ave

City State Zip Code  
New York NY 10022-3111

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

Name of Employer Occupation  
Self Employed Investor

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 6

Transaction ID: C1314711

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 17 Cushing St

City State Zip Code  
Hingham MA 02043-3625

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

Name of Employer Occupation  
MISA Industries Manufacturer

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 6

Transaction ID: C1314721

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Michael J. Perik

Mailing Address 170 Westfield Drive

City State Zip Code  
East Greenwich RI 02818-1236

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

Name of Employer Occupation  
Achievement Technologies CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 6

Transaction ID: C1314731

Amount of Each Receipt this Period  
5000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 21 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Peter M. Halloran

Mailing Address 9 Coach Rd

City Lexington State MA Zip Code 02420-1101

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

Name of Employer Pharos Service Co. Occupation Invesment Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2006

Transaction ID: C1314741

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Zenon C. Christodoulou

Mailing Address 34 Fox Chase Run

City North Branch State NJ Zip Code 08876-3305

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

Name of Employer Creative Color Litho Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2006

Transaction ID: C1320181

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 745 5th Ave  
Fl 24

City New York State NY Zip Code 10151-2501

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

Name of Employer The Blackstone Group Occupation Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2006

Transaction ID: C1320191

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 22 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

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

Mailing Address 3316 Rowland PI NW

City State Zip Code  
Washington DC 20008-3225

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

Name of Employer Occupation  
Sidley Austin, LLP Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: C1320201

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Thurston R. Moore

Mailing Address 20 Hampton Hills Ln

City State Zip Code  
Richmond VA 23226-2309

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

Name of Employer Occupation  
Hunton & Williams Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: C1320211

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
James M. Allwin

Mailing Address 875 3rd Avenue  
21st Floor

City State Zip Code  
New York NY 10022-7206

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

Name of Employer Occupation  
Aetos Capital Founder/President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

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

Transaction ID: C1320261

Amount of Each Receipt this Period  
5000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 6250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |  |               |
|--|--|---------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12                    | PAGE 23 / 197 |
|  | (check only one)   |               |
|  | <input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Richard W. Edelman   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 10 / 2006 |  |
| Mailing Address 277 W End Ave<br>Apt 4B   |  | <b>Transaction ID:</b> C1312521                          |  |
| City State Zip Code<br>New York NY 10023-2608   |  | Amount of Each Receipt this Period<br>1000.00            |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Edelman Public Relations  |  | Occupation<br>President/CEO                              |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>2000.00                      |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Stephen J. Kutz  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 19 / 2006 |  |
| Mailing Address 1619 42nd Avenue East   |  | <b>Transaction ID:</b> C1315061                          |  |
| City State Zip Code<br>Seattle WA 98112-3215  |  | Amount of Each Receipt this Period<br>2000.00            |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>JP Morgan Guaranty Trust Company  |  | Occupation<br>Vice President                             |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>2500.00                      |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> David Scialabba  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 19 / 2006 |  |
| Mailing Address 210 Sunset Rd<br># B  |  | <b>Transaction ID:</b> C1315101                          |  |
| City State Zip Code<br>Oyster Bay NY 11771-3405   |  | Amount of Each Receipt this Period<br>250.00             |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>E*Trade Financial   |  | Occupation<br>Manager                                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>250.00                       |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 24 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Michael Kramer</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 19 / 2006 |  |
| Mailing Address 4610 Ryan Ct  |  | <b>Transaction ID: C1315111</b>                          |  |
| City State Zip Code<br>Rocklin CA 95677-2269  | Amount of Each Receipt this Period<br>250.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>CPA                            |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Lisa Hemmer</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 19 / 2006 |  |
| Mailing Address 5204 Wehawken Rd  |   | <b>Transaction ID: C1315171</b>                          |  |
| City State Zip Code<br>Bethesda MD 20816-3132   | Amount of Each Receipt this Period<br>5000.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |  |  |
| Name of Employer<br>U.S. Dept. of Interior  | Occupation<br>Administrative Judge            |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. J. Michael Hemmer</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 19 / 2006 |  |
| Mailing Address 1214 Howard St<br>307   |   | <b>Transaction ID: C1315181</b>                          |  |
| City State Zip Code<br>Omaha NE 68102-2842  | Amount of Each Receipt this Period<br>1000.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |  |  |
| Name of Employer<br>Union Pacific Corporation   | Occupation<br>Attorney                        |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3500.00           |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 6250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 25 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Stephen J. Kutz  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 1619 42nd Avenue East   |  | Transaction ID: C1314401  |
| City State Zip Code<br>Seattle WA 98112-3215  | Amount of Each Receipt this Period<br>500.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>JP Morgan Guaranty Trust Company  | Occupation<br>Vice President                 |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00          |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Lance Ullom  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 6009 4th St N   |  | Transaction ID: C1314481  |
| City State Zip Code<br>Arlington VA 22203-1076  | Amount of Each Receipt this Period<br>1500.00        |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Executive Vice President, Fixed Income |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1500.00                  |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Lorry Newhouse   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |
| Mailing Address 720 Park Ave Apt 18-A   |   | Transaction ID: C1315261  |
| City State Zip Code<br>New York NY 10021-4954   | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>Self Employed   | Occupation<br>Artist                          |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 26 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Philip Band  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |  |
| Mailing Address 151 Maribu Dr   |  | <b>Transaction ID:</b> C1315281                               |  |
| City State Zip Code<br>West Orange NJ 07052   |  | Amount of Each Receipt this Period<br>1000.00                 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Occupation<br>New York University Professor  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                           |  |

|   |  |   |  |
|---|--|---|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Barbara B. Ukrop   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 8 / 2 0 0 6 |  |
| Mailing Address 4306 Sulgrave Rd  |  | <b>Transaction ID:</b> C1314781                               |  |
| City State Zip Code<br>Richmond VA 23221-3257   |  | Amount of Each Receipt this Period<br>5000.00                 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Occupation<br>First Market Bank Banker   |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>5000.00                           |  |

|   |  |   |  |
|---|--|---|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Matthew A. Gohd  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |  |
| Mailing Address 650 5th Avenue<br>6th Floor   |  | <b>Transaction ID:</b> C1315271                               |  |
| City State Zip Code<br>New York NY 10019  |  | Amount of Each Receipt this Period<br>1000.00                 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Occupation<br>Pali Capital Managing Director   |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                           |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 27 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Rebecca T. Craig

Mailing Address 1030 Rustling Oaks Dr

City State Zip Code  
Charlottesville VA 22901-8000

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: C1315351

Amount of Each Receipt this Period  
5000.00

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

Mailing Address PO Box 1304

City State Zip Code  
Friday Harbor WA 98250-1304

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

Name of Employer Strategic News Service Occupation Chairman/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C1315791

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Victoria B. Saunder

Mailing Address 5001 Tamarind Reef Ste 28

City State Zip Code  
Christiansted VI 00820-4582

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: C1315431

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 11000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 28 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Maureen Durkan</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 5 / 2 0 0 6 |  |
| Mailing Address 4540 8th Ave NE<br>Apt 105  |  | <b>Transaction ID: C1315591</b>                               |  |
| City State Zip Code<br>Seattle WA 98105-4784  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>Qualis Health   | Occupation<br>Registered Nurse               |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Ann P. Wyckoff</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6 |  |
| Mailing Address The Highlands   |   | <b>Transaction ID: C1315771</b>                               |  |
| City State Zip Code<br>Shoreline WA 98177-5004  | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>N/A   | Occupation<br>Community Volunteer             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Stanley H. Barer</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6 |  |
| Mailing Address 3048 E Laurelhurst Dr NE  |   | <b>Transaction ID: C1315901</b>                               |  |
| City State Zip Code<br>Seattle WA 98105-5331  | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Saltchuk Resources, Inc.  | Occupation<br>CEO                             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 29 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Susan S. Goode

Mailing Address 7301 Woodway Ln

City Norfolk State VA Zip Code 23505-3149

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 2 7 / 2 0 0 6

**Transaction ID:** C1316071

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
John L. Lewis, IV

Mailing Address 4691 Sherwood Farm

City Charlottesville State VA Zip Code 22902-7858

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

Name of Employer Gardner Lewis Asset Management Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 2 8 / 2 0 0 6

**Transaction ID:** C1316251

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
John F. Wieland

Mailing Address 3245 Nancy Creek Rd NW

City Atlanta State GA Zip Code 30327-1905

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

Name of Employer John Wieland Homes & Neighborhood Occupation Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

**Transaction ID:** C1311881

Amount of Each Receipt this Period  
 5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 30 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Constance A. Sadler

Mailing Address 35 Oxford St

City State Zip Code  
Chevy Chase MD 20815-4230

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

Name of Employer Occupation  
Sidley Austin, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 06 / 2006

**Transaction ID:** C1311971

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph B. Tompkins, Jr.

Mailing Address 8146 Wellington Rd

City State Zip Code  
Alexandria VA 22308-1214

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

Name of Employer Occupation  
Sidley & Austin, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 06 / 2006

**Transaction ID:** C1311981

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
E. Michael Ramberg

Mailing Address 20369 Stillhouse Branch PI

City State Zip Code  
Potomac Falls VA 20165-5152

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

Name of Employer Occupation  
E\*Trade Financial Controller

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
04 / 06 / 2006

**Transaction ID:** C1311991

Amount of Each Receipt this Period  
500.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>6500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 31 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Heather C. Cox   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 1 / 2 0 0 6 |  |
| Mailing Address 3106 Russell Rd   |   | <b>Transaction ID:</b> C1301341                               |  |
| City State Zip Code<br>Alexandria VA 22305-1720   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>VP, Operations                  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Nancy Taylor   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 7 / 2 0 0 6 |  |
| Mailing Address 18 W 87th St Apt 2A   |  | <b>Transaction ID:</b> C1312081                               |  |
| City State Zip Code<br>New York NY 10024-3554   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>N/A   | Occupation<br>Homemaker                      |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Mary Anne Anne Mason   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 3711 Harrison St NW   |  | <b>Transaction ID:</b> C1312511                               |  |
| City State Zip Code<br>Washington DC 20015-1815   | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>Hogan & Hartson   | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

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

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

|  |  |               |
|--|--|---------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 32 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Peter K. Ingerman  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 310 W 79th St<br>APT 4E   |   | <b>Transaction ID:</b> C1312551                               |  |
| City State Zip Code<br>New York NY 10024-6121   | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Chadbourne & Parke, LLP   | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Hunt Bonan   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 100 N Hancock St  |   | <b>Transaction ID:</b> C1313111                               |  |
| City State Zip Code<br>Mc Leansboro IL 62859-1604   | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Peoples National Bank   | Occupation<br>Chairman of the Board           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Susan Uchitelle  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 41 Crestwood Dr<br>Suite 200  |   | <b>Transaction ID:</b> C1313141                               |  |
| City State Zip Code<br>Saint Louis MO 63105-3032  | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Self Employed   | Occupation<br>Education Consultant            |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 8500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |



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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 33 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Eric Seasholtz

Mailing Address 10600 Unity Ln

City State Zip Code  
Potomac MD 20854-1984

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

Name of Employer E\*Trade Financial Occupation Portfolio Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: C1314442

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Jennifer L. Janss

Mailing Address 1548 44th St NW

City State Zip Code  
Washington DC 20007-2066

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

Name of Employer Sidley & Austin, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: C1314472

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Michael C. Hlushak

Mailing Address 2310 14th Street North  
Apt. 205

City State Zip Code  
Arlington VA 22201-5876

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

Name of Employer E\*Trade Financial Occupation Treasurer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: C1314482

Amount of Each Receipt this Period  
1500.00

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 34 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Darrell Roberts  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 304 Scioto Ct   |  | <b>Transaction ID:</b> C1314492                               |  |
| City State Zip Code<br>Duluth GA 30097-2053   |  | Amount of Each Receipt this Period<br>2500.00                 |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>E*Trade Financial   |  | Occupation<br>Vice President                                  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>2500.00                           |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Karen Wall   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 19947 Alexandras Grove Dr   |  | <b>Transaction ID:</b> C1314502                               |  |
| City State Zip Code<br>Ashburn VA 20147-3112  |  | Amount of Each Receipt this Period<br>500.00                  |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>E*Trade Financial   |  | Occupation<br>Vice President, Human Resources                 |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>500.00                            |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Justin J. Schug  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 4347 Embassy Park Dr NW   |  | <b>Transaction ID:</b> C1314512                               |  |
| City State Zip Code<br>Washington DC 20016-3608   |  | Amount of Each Receipt this Period<br>500.00                  |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>E*Trade Financial   |  | Occupation<br>Director, Corporate Aviation                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>500.00                            |  |

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

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

|  |  |               |
|--|--|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 35 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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

NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Robert S. Evans</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 100 Stamford Pl   |   | <b>Transaction ID: C1314712</b>                          |  |
| City State Zip Code<br>Stamford CT 06902-6732   | Amount of Each Receipt this Period<br>2500.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |  |  |
| Name of Employer<br>Crane Company   | Occupation<br>Chairman                        |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00           |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. R. Robert Popeo</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 1 Financial Ctr   |  | <b>Transaction ID: C1314722</b>                          |  |
| City State Zip Code<br>Boston MA 02111-2621   | Amount of Each Receipt this Period<br>500.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Mintz Levin   | Occupation<br>Partner                        |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Deirdre M. McDonald</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 31 Jane St<br>Apt 15H   |   | <b>Transaction ID: C1314732</b>                          |  |
| City State Zip Code<br>New York NY 10014-1981   | Amount of Each Receipt this Period<br>1000.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |  |  |
| Name of Employer<br>Sony BMG Music Entertainment  | Occupation<br>Senior Vice President           |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |  |  |

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 36 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Patricia Murphy Gruber</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 6000 Estate Charlotte Amalie  |   | <b>Transaction ID: C1314742</b>                               |  |
| City State Zip Code<br>St Thomas VI 00802-2314  | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Globalvest  | Occupation<br>Non-Profit Administrator        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Daniel S. Loeb</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |  |
| Mailing Address 390 Park Avenue<br>18th Floor   |   | <b>Transaction ID: C1320192</b>                               |  |
| City State Zip Code<br>New York NY 10022-4608   | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Third Point, LLC  | Occupation<br>CEO                             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Mario A. Indelicato</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 3 0 / 2 0 0 6 |  |
| Mailing Address 49 E 21st St<br>Apt 3D  |  | <b>Transaction ID: C1320212</b>                               |  |
| City State Zip Code<br>New York NY 10010-6273   | Amount of Each Receipt this Period<br>200.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Morgan Stanley  | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>400.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 7700.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 37 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Edward L. Bridge

Mailing Address 9 Brook Bay Rd

City State Zip Code  
Mercer Island WA 98040-4621

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

Name of Employer Ben Bridge Jeweler, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3333.67

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2006

Transaction ID: C1320262

Amount of Each Receipt this Period  
833.67

\* In-Kind: Catering/Events

**B.** Full Name (Last, First, Middle Initial)  
Paul Glist

Mailing Address 1111 Francis Hammond Pkwy

City State Zip Code  
Alexandria VA 22302-3404

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

Name of Employer Cole Raywid & Braverman, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2006

Transaction ID: C1315172

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Veryl L. Riddle

Mailing Address 1444 Timberlake Parkway

City State Zip Code  
Saint Louis MO 63107

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

Name of Employer Bryan Cave, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2006

Transaction ID: C1315182

Amount of Each Receipt this Period  
500.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2333.67 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 38 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Gabriel Dalporto

Mailing Address 1365 York Ave  
Apt 14C

City State Zip Code  
New York NY 10021-4037

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

Name of Employer E\*Trade Financial Occupation Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C1314342

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 470 Park Ave

City State Zip Code  
New York NY 10022-1990

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

Name of Employer New York City Cultural Affairs Commiss Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: C1315262

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Robert H. Werbel

Mailing Address 5 E 88th St

City State Zip Code  
New York NY 10128-0503

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

Name of Employer Heller Ehrman, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C1315272

Amount of Each Receipt this Period  
1000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 39 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Warren D. Leight

Mailing Address 115 W 27th St

City State Zip Code  
New York NY 10001-6217

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

Name of Employer Occupation  
Sunshine Productions Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2006

Transaction ID: C1315282

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Robin Donohoe

Mailing Address 3 25th Ave N

City State Zip Code  
San Francisco CA 94121-1108

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

Name of Employer Occupation  
Draper Richards Venture Capital

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2006

Transaction ID: C1315432

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ann M. Kelly

Mailing Address 1500 4th Ave Apt 704

City State Zip Code  
Seattle WA 98101-1666

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

Name of Employer Occupation  
Lake Partners Strategy Consultants Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2006

Transaction ID: C1315782

Amount of Each Receipt this Period  
1000.00

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 40 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Cynthia Wayburn</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6 |   |
| Mailing Address PO Box 546  |                                     | <b>Transaction ID: C1315792</b>                               |   |
| City<br>Bellevue  | State<br>WA                         | Zip Code<br>98009-0546  | Amount of Each Receipt this Period<br>2000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     |   |   |
| Name of Employer<br>Self Employed   | Occupation<br>Conservationist       |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00 |   |   |

|   |                                    |   |  |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Ruth Merinda Davis Wilson</b>  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |  |
| Mailing Address 7825 Orchid St NW   |                                    | <b>Transaction ID: C1320202</b>                               |  |
| City<br>Washington  | State<br>DC                        | Zip Code<br>20012-1131  | Amount of Each Receipt this Period<br>250.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                    |   |  |
| Name of Employer<br>Sidley Austin, LLP  | Occupation<br>Attorney             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00 |   |  |

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Paul G. Abrams</b>   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6 |   |
| Mailing Address 2125 1st Ave<br>Number 1501   |                                     | <b>Transaction ID: C1315902</b>                               |   |
| City<br>Seattle   | State<br>WA                         | Zip Code<br>98121-3109  | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     |   |   |
| Name of Employer<br>CEPTYR, Inc.  | Occupation<br>President/CEO         |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 41 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

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

Mailing Address 7301 Woodway Ln

City Norfolk State VA Zip Code 23505-3149

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 6

Transaction ID: C1316072

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 313 Little Falls Street

City Falls Church State VA Zip Code 22046-2635

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

Name of Employer Hogan & Hartson Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: C1311882

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Chad E. Turner

Mailing Address 11487 Heritage Commons Way

City Reston State VA Zip Code 20194-1029

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

Name of Employer E\*Trade Financial Occupation Accountant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: C1312002

Amount of Each Receipt this Period  
250.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 10250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 42 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mike Medavoy</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 1 / 2 0 0 6 |
| Mailing Address 65 Beverly Park<br>10125 West Washington Boulevard  |   | Transaction ID: C1301342                                      |
| City State Zip Code<br>Beverly Hills CA 90210-1574  | Amount of Each Receipt this Period<br>2000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>Phoenix Pictures  | Occupation<br>CEO                             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00           |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Maria Reyes-Buzaitis</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |
| Mailing Address 9969 Cyrandall Dr   |  | Transaction ID: C1312512                                      |
| City State Zip Code<br>Oakton VA 22124-2950   | Amount of Each Receipt this Period<br>250.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Dir. of Treasury               |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Vanessa Getty</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |
| Mailing Address 2900 Vallejo St   |   | Transaction ID: C1312522                                      |
| City State Zip Code<br>San Francisco CA 94123-4619  | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>WG Investments  | Occupation<br>Advisor                         |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 43 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Diane A. Fogg</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 1185 Park Ave<br>7-A  |   | <b>Transaction ID: C1312552</b>                               |  |
| City State Zip Code<br>New York NY 10128-1308   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>N/A   | Occupation<br>Homemaker                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. F. William Bonan</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address PO Box 309  |   | <b>Transaction ID: C1313112</b>                               |  |
| City State Zip Code<br>Mc Leansboro IL 62859-0309   | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Peoples National Bank   | Occupation<br>President                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Desiree A. Knapp</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 1528 Autumn Leaf Dr   |   | <b>Transaction ID: C1313122</b>                               |  |
| City State Zip Code<br>Ballwin MO 63021-7612  | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Pyramid Construction  | Occupation<br>Director of Development         |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 8500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 44 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Angus Macbeth

Mailing Address 3600 Rittenhouse St NW

City Washington State DC Zip Code 20015-2414

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

Name of Employer Sidley Austin, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C1313142

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6306 Powhatan Ave

City Norfolk State VA Zip Code 23508-1018

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

Name of Employer Norfolk Southern Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: C1313152

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Edward H. Dejoux

Mailing Address 474 Duck Pond Rd

City Locust Valley State NY Zip Code 11560-2406

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

Name of Employer E\*Trade Financial Occupation Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: C1314343

Amount of Each Receipt this Period  
500.00

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 45 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Jane Gelman</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |   |
| Mailing Address 6304 Maiden Ln  |                                     | <b>Transaction ID: C1314433</b>                               |   |
| City<br>Bethesda  | State<br>MD                         | Zip Code<br>20817-5610  | Amount of Each Receipt this Period<br>5000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     |   |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Financial Services    |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |   |

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Krishnan Harihara</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |   |
| Mailing Address 13132 Curved Iron Rd  |                                     | <b>Transaction ID: C1314443</b>                               |   |
| City<br>Oak Hill  | State<br>VA                         | Zip Code<br>20171-2930  | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     |   |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Director, Credit      |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |   |

|   |   |   |   |
|---|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Carol A. Phelan-Marsh</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |   |
| Mailing Address 500 Seneca Rd   |   | <b>Transaction ID: C1314483</b>                               |   |
| City<br>Great Falls   | State<br>VA                             | Zip Code<br>22066-1117  | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |   |   |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Vice President, Marketing |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00     |   |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 46 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Raymond Q. Konieczka   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 23509 Log House Rd  |  | <b>Transaction ID:</b> C1314513                               |  |
| City State Zip Code<br>Gaithersburg MD 20882-2706   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Banking                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Douglas A. Gross   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 126 Waverly Pl Apt 3A   |   | <b>Transaction ID:</b> C1314713                               |  |
| City State Zip Code<br>New York NY 10011-9188   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Hofheimer, Gartlir & Gross, LLP   | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Mischa A. Zabin  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 33 Byron Ln   |   | <b>Transaction ID:</b> C1314733                               |  |
| City State Zip Code<br>Larchmont NY 10538-1617  | Amount of Each Receipt this Period<br>1500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Calyon  | Occupation<br>Banker                          |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1500.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 2750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 47 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Kary Antholis  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 9716 Homer Street   |   | <b>Transaction ID:</b> C1314743                               |  |
| City State Zip Code<br>Los Angeles CA 90035   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>HBO Films   | Occupation<br>Executive Producer              |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> John F.X. Graham   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |  |
| Mailing Address 25 Fairview Ave   |   | <b>Transaction ID:</b> C1320183                               |  |
| City State Zip Code<br>Verona NJ 07044-1341   | Amount of Each Receipt this Period<br>2000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Fairview Insurance Co.  | Occupation<br>CEO                             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Walter F. Timpone  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |  |
| Mailing Address 706 Orange Ave  |   | <b>Transaction ID:</b> C1320193                               |  |
| City State Zip Code<br>Cranford NJ 07016-2052   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>McElroy Deutsch & Mulaney   | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 48 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> John L Sachs   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 2900 45th St NW   |                                    | <b>Transaction ID:</b> C1320203                                 |
| City Washington   | State DC                           | Zip Code 20016-3559   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    | Amount of Each Receipt this Period<br>500.00                    |
| Name of Employer Latham & Watkins   | Occupation Attorney                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Robert Light   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 3 0 / 2 0 0 6 |
| Mailing Address 3940 Hayvenhurst Dr   |                                     | <b>Transaction ID:</b> C1320213                                 |
| City Encino   | State CA                            | Zip Code 91436-3641   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>1000.00                   |
| Name of Employer Creative Artists Agency  | Occupation Agent                    |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Mark B Callaghan   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 4 / 2 0 0 6 |
| Mailing Address 1162 22nd Ave E   |                                     | <b>Transaction ID:</b> C1320263                                 |
| City Seattle  | State WA                            | Zip Code 98112-3517   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>169.20                    |
| Name of Employer Cedar Grove Investments  | Occupation Principal                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2169.20 |   |

\* In-Kind: Catering/Events

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1669.20 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |



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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 49 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

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

Mailing Address 300 Old Bridge Ln

City Richmond State VA Zip Code 23229-8510

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

**Transaction ID:** C1315083

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Steven A. Elmendorf

Mailing Address 700 13th St NW Ste 500

City Washington State DC Zip Code 20005-3963

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

Name of Employer Bryan Cave Strategies LLC Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

**Transaction ID:** C1315093

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Stacy W. Hastie

Mailing Address 1530 S 2nd St

City Saint Louis State MO Zip Code 63104-4500

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

Name of Employer Environmental Operations, Inc. Occupation Business Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID:** C1313113

Amount of Each Receipt this Period  
1000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 50 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Sonja L. Hoel  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |
| Mailing Address 2660 Broadway St  |                                     | <b>Transaction ID:</b> C1315133                                 |
| City San Francisco  | State CA                            | Zip Code 94115-1147   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>5000.00                   |
| Name of Employer Menlo Ventures   | Occupation Managing Director        |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Tron S. Kohlhagen  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |
| Mailing Address 907 Settlement Dr   |                                    | <b>Transaction ID:</b> C1315153                                 |
| City Williamsburg   | State VA                           | Zip Code 23188-2644   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    | Amount of Each Receipt this Period<br>500.00                    |
| Name of Employer Sidley Austin, LLP   | Occupation Attorney                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Elizabeth Sherrill Merritt   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |
| Mailing Address 11105 Lakenheath Way  |                                    | <b>Transaction ID:</b> C1315163                                 |
| City Oakton   | State VA                           | Zip Code 22124-1913   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    | Amount of Each Receipt this Period<br>750.00                    |
| Name of Employer National Trust for Historic Preservation   | Occupation Attorney                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>750.00 |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 6250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 51 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

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

Mailing Address 5708 33rd Street NW

City State Zip Code  
Washington DC 20015-1643

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

Name of Employer Occupation  
Arnold & Porter Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

**Transaction ID:** C1315173

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Rebecca A. D. Nelson

Mailing Address 7 Westmoreland PI

City State Zip Code  
Saint Louis MO 63108-1227

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

Name of Employer Occupation  
Bryan Cave, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

**Transaction ID:** C1315183

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Colleen R. Ryan

Mailing Address 12359 Wedgwood Dr

City State Zip Code  
Homer Glen IL 60491-8496

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

Name of Employer Occupation  
E\*Trade Capital Markets Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 13 / 2006

**Transaction ID:** C1314423

Amount of Each Receipt this Period  
400.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1650.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 52 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Jonathan Farkas

Mailing Address 470 Park Ave

City State Zip Code  
New York NY 10022-1990

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

Name of Employer Occupation  
Banque International Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

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

Transaction ID: C1315253

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Roderick W. Mikus

Mailing Address 1 Vermont Dr

City State Zip Code  
Hazlet NJ 07730-2218

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

Name of Employer Occupation  
E\*Trade Financial Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: C1314503

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Karen DuGan

Mailing Address 116 E 63rd St  
Apt 3-C

City State Zip Code  
New York NY 10021-7325

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

Name of Employer Occupation  
N/A Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: C1315263

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 53 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Richard G. Mintz

Mailing Address 63 Atlantic Ave

City State Zip Code  
Boston MA 02110-3716

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

Name of Employer Occupation  
Mintz Levin Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 17 / 2006

**Transaction ID:** C1314723

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Marc A. Bodnick

Mailing Address 297 Park Ln

City State Zip Code  
Atherton CA 94027-5448

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

Name of Employer Occupation  
Elevation Partners Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2006

**Transaction ID:** C1315103

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Helen A. Chaikovsky

Mailing Address 6057 Ramshorn PI

City State Zip Code  
McLean VA 22101-2420

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

Name of Employer Occupation  
Self Employed Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2006

**Transaction ID:** C1315433

Amount of Each Receipt this Period  
2500.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>3750.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 54 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Henry C. Wolf

Mailing Address 334 S Botetourt Ct

City Norfolk State VA Zip Code 23507-1859

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

Name of Employer Norfolk Southern Corporation Occupation CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: C1315773

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 424 N. Union Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Carr Swanson & Randolph, LLC Occupation Special Trade Rep.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

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

Transaction ID: C1315793

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
S. Sonjia Smith

Mailing Address 815 Broomley Rd

City Charlottesville State VA Zip Code 22901-7821

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C1316073

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 11500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 55 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Audrey G. Lewis

Mailing Address 4691 Sherwood Farm

City State Zip Code  
Charlottesville VA 22902-7858

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: C1316253

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Beverly S. Johnston

Mailing Address 319 Horace Mann Ave

City State Zip Code  
Winston Salem NC 27104-3228

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

Name of Employer Blessings Project Occupation Retail

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: C1316263

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Jorge A. Del Calvo

Mailing Address 2475 Hanover Street

City State Zip Code  
Palo Alto CA 94304-1115

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

Name of Employer Pillsbury Winthrop LLP Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: C1312013

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 10500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 56 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael L. Charland

Mailing Address 60 Shelter Rock Rd

City Trumbull State CT Zip Code 06611-3326

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

Name of Employer E\*Trade Financial Occupation VP, Lending Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C1312513

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Rosemary A. Moukad

Mailing Address 20 W 77th St Apt 12-B

City New York State NY Zip Code 10024-5127

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

Name of Employer E.P. Dine, Inc. Occupation Legal Recruiter

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C1312523

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
James Lamont Stengel

Mailing Address 175 W 93rd St Apt 5H

City New York State NY Zip Code 10025-9323

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

Name of Employer Orrick Herrington & Sutcliffe Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C1312553

Amount of Each Receipt this Period  
1000.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |               |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 57 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |               |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Robert N. Rousey   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 1100 Main St<br>Suite 2700  |   | <b>Transaction ID:</b> C1313123                               |  |
| City State Zip Code<br>Kansas City MO 64105-5195  | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Self Employed   | Occupation<br>Developer                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Ann E. Bushmiller  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 3822 Ingomar St NW  |  | <b>Transaction ID:</b> C1313143                               |  |
| City State Zip Code<br>Washington DC 20015-1930   | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Ropes & Gray  | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Christine Prame  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 11700 Leesburg Pike   |  | <b>Transaction ID:</b> C1313153                               |  |
| City State Zip Code<br>Herndon VA 20170-2103  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Sidley Austin, LLP  | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 5750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 58 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> David Steinmetz  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address 1910 Franklin Pl  |  | <b>Transaction ID:</b> C1314344                               |
| City State Zip Code<br>Moon Township PA 15108-3531  | Amount of Each Receipt this Period<br>250.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Director                       |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Karen M Boezi  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 1 Spencer Ct  |   | <b>Transaction ID:</b> C1314414                               |
| City State Zip Code<br>Sausalito CA 94965-2024  | Amount of Each Receipt this Period<br>2000.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |   |   |
| Name of Employer<br>Thomas, McNerney & Partners   | Occupation<br>Venture Investor                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00           |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> David Grove  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 3414 N Hoyne Ave  |  | <b>Transaction ID:</b> C1314444                               |
| City State Zip Code<br>Chicago IL 60618-6110  | Amount of Each Receipt this Period<br>250.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Marketing                      |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 59 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> David A. Fleischl  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 3 Bearfort Ter  |   | <b>Transaction ID:</b> C1314484                               |  |
| City State Zip Code<br>Ringwood NJ 07456-2915   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Manager                         |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Gregory A. Framke  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 48 Hillside Ave   |   | <b>Transaction ID:</b> C1314494                               |  |
| City State Zip Code<br>Short Hills NJ 07078-2054  | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Executive                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Lea K. Stendahl  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 222 E 34th St<br>Number 916   |  | <b>Transaction ID:</b> C1314504                               |  |
| City State Zip Code<br>New York NY 10016-4842   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Marketing                      |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 60 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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

NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Timothy M. Williams

Mailing Address 1104 Morningwood Ln

City State Zip Code  
Great Falls VA 22066-1609

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

Name of Employer  
E\*Trade Financial

Occupation  
Compliance Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 13 / 2006

**Transaction ID:** C1314514

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Jacob M. Gross

Mailing Address 126 Waverly Pl

City State Zip Code  
New York NY 10011-9188

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

Name of Employer  
Cooke Center

Occupation  
Clerical Assistant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2006

**Transaction ID:** C1314714

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth Beretta Perik

Mailing Address 313 Washington St  
Ste 225

City State Zip Code  
Newton MA 02458-1626

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

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2006

**Transaction ID:** C1314724

Amount of Each Receipt this Period  
5000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 6500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 61 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>David Wassong  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 201 E 69th St<br>Ph G   |  | <b>Transaction ID:</b> C1314734                               |  |
| City State Zip Code<br>New York NY 10021-5465   |  | Amount of Each Receipt this Period<br>1000.00                 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Occupation<br>Soros Fund Management Managing Director  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                           |  |

|   |  |   |  |
|---|--|---|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Amy Phelan   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 635 Park Ave  |  | <b>Transaction ID:</b> C1314744                               |  |
| City State Zip Code<br>New York NY 10021-6546   |  | Amount of Each Receipt this Period<br>1000.00                 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Occupation<br>N/A Homemaker  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                           |  |

|   |  |   |  |
|---|--|---|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Susan S. Wynne   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 8 / 2 0 0 6 |  |
| Mailing Address 1085 S Bay Shore Dr   |  | <b>Transaction ID:</b> C1314784                               |  |
| City State Zip Code<br>Virginia Beach VA 23451-3872   |  | Amount of Each Receipt this Period<br>5000.00                 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Occupation<br>N/A Homemaker  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>5000.00                           |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 63 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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

NAME OF COMMITTEE (In Full)  
Forward Together PAC

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

Mailing Address 4 Rue de Commaille

City State Zip Code  
Paris, France 7500

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

Name of Employer Occupation  
Lieber Strategies Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2006

Transaction ID: C1320214

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 20504 Straham Way

City State Zip Code  
Potomac Falls VA 20165-5147

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

Name of Employer Occupation  
E\*Trade Financial Accountant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 06 / 2006

Transaction ID: C1311994

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
R. Randall Wang

Mailing Address 44 Arundel PI

City State Zip Code  
Saint Louis MO 63105-2265

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

Name of Employer Occupation  
Bryan Cave, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

Transaction ID: C1315094

Amount of Each Receipt this Period  
250.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>3750.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 64 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael Lynn Feser

Mailing Address 4110 George Rd

City Tampa State FL Zip Code 33634-7466

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

Name of Employer E\*Trade Financial Occupation Director Customer Service

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 1 9 / 2 0 0 6

**Transaction ID:** C1315104

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Linden Amadon

Mailing Address 4215 East Blaine Street

City Seattle State WA Zip Code 98112

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

Name of Employer Self Employed Occupation Venture Capitalist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

**Transaction ID:** C1320474

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
James T. Como

Mailing Address 110 Clagett Crossing PI

City Gaithersburg State MD Zip Code 20878-5668

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

Name of Employer E\*Trade Financial Occupation Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 1 9 / 2 0 0 6

**Transaction ID:** C1315134

Amount of Each Receipt this Period  
 250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 5500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |



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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 65 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Diane Susan Millman</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |  |
| Mailing Address 2918 29th St NW   |   | <b>Transaction ID: C1315174</b>                               |  |
| City State Zip Code<br>Washington DC 20008-3415   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Powers Pyles Sutter Verville, PC  | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. T. Hale Boggs</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |  |
| Mailing Address 804 Manhattan Ave   |  | <b>Transaction ID: C1315184</b>                               |  |
| City State Zip Code<br>Manhattan Beach CA 90266-5518  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Manatt, Phelps, Phillips  | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Tracy Maxwell Snyder</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |  |
| Mailing Address 1020 5th Ave  |   | <b>Transaction ID: C1315254</b>                               |  |
| City State Zip Code<br>New York NY 10028-0133   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>N/A   | Occupation<br>Homemaker                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 66 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Eric Friedberg

Mailing Address 755 Park Ave

City State Zip Code  
New York NY 10021-4255

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

Name of Employer Lefrek Organization Occupation CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C1315274

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Richard W. Edelman

Mailing Address 277 W End Ave Apt 4B

City State Zip Code  
New York NY 10023-2608

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

Name of Employer Edelman Public Relations Occupation President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: C1315264

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Haribnai K. Thakkar

Mailing Address 948 Prince Phillip Dr

City State Zip Code  
Virginia Beach VA 23452-3930

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

Name of Employer Self Employed Occupation Hotel Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: C1315344

Amount of Each Receipt this Period  
5000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 67 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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

NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Steven T. Kirsch

Mailing Address 13930 La Paloma Rd

City State Zip Code  
Los Altos Hills CA 94022-2628

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

Name of Employer Occupation  
Propel Software Corp. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: C1315434

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Richard L. Feigen

Mailing Address 34 E 69th St

City State Zip Code  
New York NY 10021-5016

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

Name of Employer Occupation  
Richard Feigen & Co. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2539.72

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 6

Transaction ID: C1320914

Amount of Each Receipt this Period  
2539.72

\* In-Kind: Catering/Events

**C.** Full Name (Last, First, Middle Initial)  
David McShea

Mailing Address 4214 53rd Avenue NE

City State Zip Code  
Seattle WA 98105

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

Name of Employer Occupation  
Perkins Coie Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: C1315734

Amount of Each Receipt this Period  
250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3039.72 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 68 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

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

Mailing Address 1520 Duke Of Windsor Rd

City State Zip Code  
Virginia Beach VA 23454-2504

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

Name of Employer Occupation  
Swimway Corporation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

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

Transaction ID: C1315774

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Stephen L. DeRham

Mailing Address 4608 SW Seattle St

City State Zip Code  
Seattle WA 98116-1641

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

Name of Employer Occupation  
Concur Technologies Software Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: C1315784

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Russell W. Daggatt

Mailing Address 933 N Northlake Way  
Boat 13

City State Zip Code  
Seattle WA 98103-8874

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

Name of Employer Occupation  
Self Employed Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: C1315794

Amount of Each Receipt this Period  
5000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 8000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 69 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Laura L. Donald

Mailing Address 4315 NE 33rd St

City State Zip Code  
Seattle WA 98105-5301

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

**Transaction ID:** C1315904

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ruthann Lorentzen

Mailing Address 3411 East Mercer Street

City State Zip Code  
Seattle WA 98112

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

Name of Employer Self Employed Occupation Business Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID:** C1315984

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Michael D. Bills

Mailing Address 815 Broomley Road

City State Zip Code  
Charlottesville VA 22901-7821

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

Name of Employer Bluestream Asset Management Occupation Money Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 6

**Transaction ID:** C1316074

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 10500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 70 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Celia Roady</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |  |
| Mailing Address 3100 New Mexico Ave NW  |  | <b>Transaction ID: C1316264</b>                               |  |
| City State Zip Code<br>Washington DC 20016-3521   | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Morgan Lewis  | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Jane S. Reese</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 6 |  |
| Mailing Address 824 Arcturus on the Potomac   |   | <b>Transaction ID: C1311884</b>                               |  |
| City State Zip Code<br>Alexandria VA 22308  | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>N/A   | Occupation<br>Retired                         |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Karen H. Shook</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 6 |  |
| Mailing Address 2301 N St NW Apt 601  |   | <b>Transaction ID: C1311974</b>                               |  |
| City State Zip Code<br>Washington DC 20037-1138   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>YMCA-DC   | Occupation<br>Water Aerobics Instructor       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 71 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Mark G. Aron   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 6 |  |
| Mailing Address 8 East Melrose Street   |   | <b>Transaction ID:</b> C1311984                               |  |
| City State Zip Code<br>Chevy Chase MD 20815-4204  | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>AARP  | Occupation<br>Retired                         |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Erik W. Thoresen   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 6 |  |
| Mailing Address 100 Jane St Apt 9C  |  | <b>Transaction ID:</b> C1312004                               |  |
| City State Zip Code<br>New York NY 10014-1766   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Director                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> David Kuney  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 1 / 2 0 0 6 |  |
| Mailing Address 9200 Cambridge Manor Ct   |  | <b>Transaction ID:</b> C1301344                               |  |
| City State Zip Code<br>Potomac MD 20854-4420  | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Sidley & Austin, LLP  | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 72 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Thomas N. Allen  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 7 / 2 0 0 6 |
| Mailing Address 337 Clovelly Rd   |                                     | <b>Transaction ID:</b> C1312084                               |
| City Richmond   | State VA                            | Zip Code 23221-3701   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>5000.00                 |
| Name of Employer<br>The Clovelly Corporation  | Occupation<br>Chairman              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> John R. Snow   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |
| Mailing Address 5609 Springfield Dr   |                                     | <b>Transaction ID:</b> C1312514                               |
| City Bethesda   | State MD                            | Zip Code 20816-1239   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>1000.00                 |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Banker                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Marshall M. Cohen  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |
| Mailing Address 5 Country Club Dr   |                                     | <b>Transaction ID:</b> C1312524                               |
| City Larchmont  | State NY                            | Zip Code 10538-1108   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>1000.00                 |
| Name of Employer<br>Pilot Group   | Occupation<br>Executive             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 7000.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |



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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 73 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Linda Yu Lam

Mailing Address 17 E 89th St  
Apt 8-D

City State Zip Code  
New York NY 10128-0615

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

Name of Employer Occupation  
CitiGroup International Banking

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID:** C1312554

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6529 Sunny Hill Ct

City State Zip Code  
McLean VA 22101-1640

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

Name of Employer Occupation  
N/A Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 12 / 2006

**Transaction ID:** C1313144

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Christopher Reyes

Mailing Address 9063 Cedar Ridge Dr

City State Zip Code  
Granite Bay CA 95746-7237

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

Name of Employer Occupation  
E\*Trade Financial Director, Regulatory

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 12 / 2006

**Transaction ID:** C1314345

Amount of Each Receipt this Period  
250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 74 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Christopher Larkin</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 56 N Sunnycrest Dr  |  | <b>Transaction ID: C1314435</b>                               |  |
| City State Zip Code<br>Little Silver NJ 07739-1127  | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Vice President Sales           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Yvette S. Butler</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 84 Chopin Dr  |  | <b>Transaction ID: C1314485</b>                               |  |
| City State Zip Code<br>Wayne NJ 07470-6202  | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Marketing                      |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Arlen W. Gelbard</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 11516 Swains Lock Ter   |   | <b>Transaction ID: C1314495</b>                               |  |
| City State Zip Code<br>Potomac MD 20854-1200  | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Financial Services              |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00           |   |  |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 75 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael Curcio

Mailing Address 31 Avenue A

City State Zip Code  
Mount Kisco NY 10549-3951

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

Name of Employer E\*Trade Financial Occupation Executive Vice President, Retail

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 13 / 2006

Transaction ID: C1314505

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 7718 Savannah Dr

City State Zip Code  
Bethesda MD 20817-1434

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

Name of Employer E\*Trade Financial Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 13 / 2006

Transaction ID: C1314515

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ann B. Perik

Mailing Address 2 Avery St  
23B S

City State Zip Code  
Boston MA 02111-1002

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2006

Transaction ID: C1314725

Amount of Each Receipt this Period  
5000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 8000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 76 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Kimberly Till  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 1965 Broadway<br>Apartment 17A  |  | <b>Transaction ID:</b> C1314735                               |  |
| City State Zip Code<br>New York NY 10023-5977   | Amount of Each Receipt this Period<br>750.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Microsoft   | Occupation<br>General Management             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>750.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Wendy Goldberg   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |  |
| Mailing Address 252 7th Ave<br>Ph U   |   | <b>Transaction ID:</b> C1320185                               |  |
| City State Zip Code<br>New York NY 10001-7305   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Six Flags, Inc.   | Occupation<br>Snr. Vice President             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Elizabeth Demy Hutcheon  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 3 0 / 2 0 0 6 |  |
| Mailing Address 527 Foothill Rd   |  | <b>Transaction ID:</b> C1320195                               |  |
| City State Zip Code<br>Bridgewater NJ 08807-2231  | Amount of Each Receipt this Period<br>500.00         |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Raritan Valley Community College  | Occupation<br>Executive Director, College Foundation |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00                   |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 77 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Joan Murray  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 5018 Warren St NW   |                                     | <b>Transaction ID:</b> C1320205                                 |
| City Washington   | State DC                            | Zip Code 20016-4370   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>1000.00                   |
| Name of Employer N/A  | Occupation Retired                  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Hartley Caldwell   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 3 0 / 2 0 0 6 |
| Mailing Address 2894 Arden Rd NW  |  | <b>Transaction ID:</b> C1320215                                 |
| City Atlanta  | State GA                                   | Zip Code 30327-1262   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Amount of Each Receipt this Period<br>500.00                    |
| Name of Employer E*Trade Financial  | Occupation Vice President Enterprise Tech. |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00         |   |

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Peter D. Van Cleve   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |
| Mailing Address 5 Hillvale Dr   |                                    | <b>Transaction ID:</b> C1315095                                 |
| City Saint Louis  | State MO                           | Zip Code 63105-3035   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    | Amount of Each Receipt this Period<br>500.00                    |
| Name of Employer Bryan Cave, LLP  | Occupation Attorney                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 78 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Lee W. Thompson

Mailing Address 6006 Mountain Villa Dr

City State Zip Code  
Austin TX 78731-3756

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

Name of Employer E\*Trade Financial Occupation VP, Architecture

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
04 / 19 / 2006

Transaction ID: C1315105

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Gregory Thomas Price

Mailing Address 151 Taylor Rd

City State Zip Code  
Tiburon CA 94920-1002

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

Name of Employer VolunteerMatch Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
04 / 12 / 2006

Transaction ID: C1313135

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Wes Hepler

Mailing Address 1604 S Lynn St

City State Zip Code  
Arlington VA 22202-1617

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

Name of Employer Cole, Raywid & Braverman Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
04 / 19 / 2006

Transaction ID: C1315145

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 79 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Michael C. Sloan</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |  |
| Mailing Address 6404 Western Ave  |  | <b>Transaction ID: C1315155</b>                               |  |
| City State Zip Code<br>Chevy Chase MD 20815-3307  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>Cole Raywid & Braverman   | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. David M. Silverman</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |  |
| Mailing Address 6022 Grove Dr   |  | <b>Transaction ID: C1315165</b>                               |  |
| City State Zip Code<br>Alexandria VA 22307-1139   | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>Cole Raywid & Braverman   | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Maurita K. Coley</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |  |
| Mailing Address 4804 32nd St NW   |  | <b>Transaction ID: C1315175</b>                               |  |
| City State Zip Code<br>Washington DC 20008-2226   | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>Cole Raywid Braverman, LLP  | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 1250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 80 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Dirk W. Wyckoff

Mailing Address 8106 Madrillon Springs Ln

City State Zip Code  
Vienna VA 22182-3765

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

Name of Employer Occupation  
E\*Trade Financial Accounting

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

**Transaction ID:** C1314445

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Margaret MacNabb

Mailing Address 145 Central Park W # 7-A

City State Zip Code  
New York NY 10023-2004

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

Name of Employer Occupation  
N/A Homemaker

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

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

**Transaction ID:** C1315255

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Norman Gross

Mailing Address 24 Cedar Ln

City State Zip Code  
Sands Point NY 11050-1300

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

Name of Employer Occupation  
Self Employed Attorney

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

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

**Transaction ID:** C1315265

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2300.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |



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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 81 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Stuart Rosow</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |  |
| Mailing Address 530 E 86th St   |   | <b>Transaction ID: C1315275</b>                               |  |
| City State Zip Code<br>New York NY 10028-7535   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Proskauer Rose, LLP   | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kevin O'Leary</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 30 Marlborough St Unit 2  |   | <b>Transaction ID: C1314715</b>                               |  |
| City State Zip Code<br>Boston MA 02116-2101   | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>The Learning Company  | Occupation<br>President                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. R. Ted Weschler</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6 |  |
| Mailing Address 1835 Bentivar Drive   |   | <b>Transaction ID: C1315345</b>                               |  |
| City State Zip Code<br>Charlottesville VA 22911-8230  | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Peninsula Capital Advisors, LLC   | Occupation<br>Managing Partner                |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 11000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 82 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Thomas Kappler</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 2 / 2 0 0 6 |  |
| Mailing Address 10606 Hannah Farm Road  |  | <b>Transaction ID: C1315425</b>                               |  |
| City State Zip Code<br>Oakton VA 22124  | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Berman Kappler Properties   | Occupation<br>President/Managing Member      |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Scott A. Edwards</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6 |  |
| Mailing Address 1822 29th Ave   |   | <b>Transaction ID: C1315785</b>                               |  |
| City State Zip Code<br>Seattle WA 98122-3210  | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Microsoft   | Occupation<br>Strategist                      |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Ann P. Wyckoff</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6 |  |
| Mailing Address The Highlands   |   | <b>Transaction ID: C1315905</b>                               |  |
| City State Zip Code<br>Shoreline WA 98177-5004  | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>N/A   | Occupation<br>Community Volunteer             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 83 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Stephen C. Swain   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 7 / 2 0 0 6 |  |
| Mailing Address 1107 Cedar Point Dr   |   | <b>Transaction ID:</b> C1316075                               |  |
| City State Zip Code<br>Virginia Beach VA 23451-3843   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>SRGS, PC  | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Nancy-Ann Min DeParle  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 6 |  |
| Mailing Address 2914 Tennyson St NW   |   | <b>Transaction ID:</b> C1311985                               |  |
| City State Zip Code<br>Washington DC 20015-2230   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>JP Morgan Partners, LLC   | Occupation<br>Consultant                      |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Todd Roadman   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 109 Todd Rd   |  | <b>Transaction ID:</b> C1312515                               |  |
| City State Zip Code<br>Katonah NY 10536-2717  | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>VP Finance                     |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |  |               |
|--|--|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 84 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Robert H. Flax   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 70 Riverside Dr<br>Number 4-E   |  | <b>Transaction ID:</b> C1312525                                 |  |
| City State Zip Code<br>New York NY 10024-5714   |  | Amount of Each Receipt this Period<br>1000.00                   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer Occupation<br>EMI Music Publishing President   |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                             |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Paul F. Balsler  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 140 Riverside Dr<br>Number 10-A   |  | <b>Transaction ID:</b> C1312555                                 |  |
| City State Zip Code<br>New York NY 10024-2605   |  | Amount of Each Receipt this Period<br>1000.00                   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer Occupation<br>Ironwood Manufacturing Fund, LP Partner  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                             |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> James J Stark  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 116 Settlers Landing Rd   |  | <b>Transaction ID:</b> C1313145                                 |  |
| City State Zip Code<br>Suffolk VA 23435-1740  |  | Amount of Each Receipt this Period<br>1000.00                   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer Occupation<br>Self Employed Physician  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                             |  |

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

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

|  |   |               |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 85 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |               |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Colleen Damon  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 17300 Four Seasons Dr   |   | <b>Transaction ID:</b> C1314346                               |  |
| City State Zip Code<br>Dumfries VA 22025-1849   | Amount of Each Receipt this Period<br>500.00  |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>E*Trade Bank  | Occupation<br>Director Post Closing Servicing |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00            |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Paul Vienick   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 135 E 57th St   |  | <b>Transaction ID:</b> C1314436                               |  |
| City State Zip Code<br>New York NY 10022-2050   | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Vice President                 |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> John A. Buchman  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 6024 Dellwood Pl  |   | <b>Transaction ID:</b> C1314486                               |  |
| City State Zip Code<br>Bethesda MD 20817-3812   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>E*Trade Bank  | Occupation<br>Vice President, General Counsel |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 86 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                       |   |   |
|---|---------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Nicholas A. Utton  |                                       | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |   |
| Mailing Address 9 Willow Rd   |                                       | <b>Transaction ID:</b> C1314506                               |   |
| City<br>Riverside   | State<br>CT                           | Zip Code<br>06878-2414  | Amount of Each Receipt this Period<br>2500.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                       |   |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Chief Marketing Officer |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00   |   |   |

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> James R. Bidwell   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |   |
| Mailing Address 10111 Mill Wheel Ln   |                                     | <b>Transaction ID:</b> C1314516                               |   |
| City<br>Vienna  | State<br>VA                         | Zip Code<br>22182-1338  | Amount of Each Receipt this Period<br>2000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     |   |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Chief Risk Officer    |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00 |   |   |

|   |                                    |   |  |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> H. Joseph Hameline   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 123 Otis St   |                                    | <b>Transaction ID:</b> C1314716                               |  |
| City<br>Cambridge   | State<br>MA                        | Zip Code<br>02141-1538  | Amount of Each Receipt this Period<br>500.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                    |   |  |
| Name of Employer<br>Mintz Levin   | Occupation<br>Partner              |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |  |

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 87 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Timothy J. Wright

Mailing Address 55B Hancock St

City Lexington State MA Zip Code 02420-3442

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

Name of Employer The Learning Company Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
04 / 17 / 2006

Transaction ID: C1314726

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Lawrence Herbert

Mailing Address 778 Park Ave

City New York State NY Zip Code 10021-3554

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

Name of Employer Pantone, Inc. Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
04 / 17 / 2006

Transaction ID: C1314736

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Margot Harris

Mailing Address 43 Oak Hills Rd

City Edison State NJ Zip Code 08820-3603

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

Name of Employer Staten Island University Hospital Occupation Psychiatric Social Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
04 / 28 / 2006

Transaction ID: C1320176

Amount of Each Receipt this Period  
500.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 6500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 88 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael Critchley

Mailing Address 354 Main St

City State Zip Code  
West Orange NJ 07052-5726

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

Name of Employer Self Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: C1320196

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5214 Carlton St

City State Zip Code  
Bethesda MD 20816-2306

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

Name of Employer Beins, Axelrod, Kraft, Gleason & Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: C1320206

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Kevin P. Delo

Mailing Address 1205 Birch Ave

City State Zip Code  
San Mateo CA 94402-1975

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

Name of Employer E\*Trade Financial Occupation Product Mangement

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 6

Transaction ID: C1315026

Amount of Each Receipt this Period  
250.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 89 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Stephen B Kinnaird

Mailing Address 4100 Aspen St

City State Zip Code  
Chevy Chase MD 20815-5059

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

Name of Employer Occupation  
Sidley Austin, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: C1312506

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
William E. Sudow

Mailing Address 1123 Crest Lane

City State Zip Code  
McLean VA 22101-1805

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

Name of Employer Occupation  
Sidley & Austin, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315146

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Joseph R. Guerra

Mailing Address 4108 Woodbine St

City State Zip Code  
Chevy Chase MD 20815-5044

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

Name of Employer Occupation  
Sidley Austin, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315166

Amount of Each Receipt this Period  
1000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |  |               |
|--|--|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 90 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Mayo S. Stuntz, Jr.  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |  |
| Mailing Address 1055 Seahaven Dr  |   | <b>Transaction ID:</b> C1315256                                 |  |
| City State Zip Code<br>Mamaroneck NY 10543-4719   | Amount of Each Receipt this Period<br>3500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer Occupation<br>Pilot Group Executive  | Aggregate Year-to-Date ▼<br>3500.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Diane A. Guenther  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |  |
| Mailing Address 146 Central Park W  |   | <b>Transaction ID:</b> C1315266                                 |  |
| City State Zip Code<br>New York NY 10023-2005   | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer Occupation<br>N/A Homemaker  | Aggregate Year-to-Date ▼<br>2500.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Thomas C. Dexter, Jr.  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |  |
| Mailing Address 125 Skunk Ln  |   | <b>Transaction ID:</b> C1315276                                 |  |
| City State Zip Code<br>Wilton CT 06897-2723   | Amount of Each Receipt this Period<br>2000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer Occupation<br>Lehman Brothers Senior Vice President  | Aggregate Year-to-Date ▼<br>2000.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 8000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 91 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Louis F. Bonacorsi

Mailing Address 326 N Central Ave

City State Zip Code  
Saint Louis MO 63105-3834

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

Name of Employer Occupation  
Bryan Cave, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 19 / 2006

**Transaction ID: C1315096**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Shelia McCarthy Weschler

Mailing Address 1835 Bentivar Dr

City State Zip Code  
Charlottesville VA 22911-8230

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

Name of Employer Occupation  
N/A Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 21 / 2006

**Transaction ID: C1315346**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Sandra D. Bowen

Mailing Address 206 Grande Dr

City State Zip Code  
Richmond VA 23229-7074

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 26 / 2006

**Transaction ID: C1315776**

Amount of Each Receipt this Period  
500.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 5750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 92 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |          |   |   |
|---|----------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Willard J. Moody, Sr.  |          | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 7 / 2 0 0 6 |   |
| Mailing Address 500 Crawford St<br>STE 300  |          | <b>Transaction ID:</b> C1316076                               |   |
| City Portsmouth   | State VA | Zip Code 23704-3844   | Amount of Each Receipt this Period<br>2500.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |          |   |   |
| Name of Employer Self-Employed  |          | Occupation Attorney   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Aggregate Year-to-Date ▼<br>2500.00                           |   |

|   |          |   |   |
|---|----------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> John T. Miranowski   |          | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 2 / 2 0 0 6 |   |
| Mailing Address 2 East Elm Street #23   |          | <b>Transaction ID:</b> C1315426                               |   |
| City Greenwich  | State CT | Zip Code 06830  | Amount of Each Receipt this Period<br>2500.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |          |   |   |
| Name of Employer Silver Point Capital   |          | Occupation Investor   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Aggregate Year-to-Date ▼<br>2500.00                           |   |

|   |          |   |  |
|---|----------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> John F. Good   |          | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 3 0 / 2 0 0 6 |  |
| Mailing Address 45-509 River Dr S   |          | <b>Transaction ID:</b> C1320216                               |  |
| City Jersey City  | State NJ | Zip Code 07310-1788   | Amount of Each Receipt this Period<br>350.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |          |   |  |
| Name of Employer E*Trade Financial  |          | Occupation Auditor  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Aggregate Year-to-Date ▼<br>350.00                            |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 5350.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 93 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Ken Valz</b>                       |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6            |
| Mailing Address Valz Houser Kogut & Barnes, PC<br>Westhill Office Park II, Building |   | Transaction ID: C1315906<br>Amount of Each Receipt this Period<br>500.00 |
| City Olympia State WA Zip Code 98502-1179   | FEC ID number of contributing federal political committee. <b>C</b>   |  |
| Name of Employer Valz Houser Kogut & Barnes, PC<br>Occupation Attorney              | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00                                       |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Pamela Cook</b> |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6             |
| Mailing Address 17206 SE 224th Street                            |   | Transaction ID: C1315946<br>Amount of Each Receipt this Period<br>1000.00 |
| City Kent State WA Zip Code 98042                                | FEC ID number of contributing federal political committee. <b>C</b>   |   |
| Name of Employer N/A<br>Occupation Homemaker                     | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00                                       |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Calvert Tyler Lester</b> |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6             |
| Mailing Address 4139 First Court Rd                                       |   | Transaction ID: C1316246<br>Amount of Each Receipt this Period<br>5000.00 |
| City Virginia Beach State VA Zip Code 23455-2848                          | FEC ID number of contributing federal political committee. <b>C</b>   |   |
| Name of Employer Calvert Appraisals<br>Occupation Investor                | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00                                       |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 6500.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 94 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Margaret R. Sosnik

Mailing Address 2400 Warwick Rd

City State Zip Code  
Winston Salem NC 27104-1942

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: C1316256

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
David R. Ford

Mailing Address 4913 Jamestown Ct

City State Zip Code  
Bethesda MD 20816-2708

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

Name of Employer Self Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: C1311986

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mia Tarpey

Mailing Address 319 Avenue C Apt 10F

City State Zip Code  
New York NY 10009-1620

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

Name of Employer E\*Trade Financial Occupation Corporate Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: C1312516

Amount of Each Receipt this Period  
250.00

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 95 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Paul B. Ebert, Sr.   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 9311 Lee Ave  |   | <b>Transaction ID:</b> C1312556                               |  |
| City State Zip Code<br>Manassas VA 20110-5555   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Commonwealth of Virginia  | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Alan C. Herzig   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 190 Fox Hollow Rd   |   | <b>Transaction ID:</b> C1313136                               |  |
| City State Zip Code<br>Woodside CA 94062-3608   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>Self Employed   | Occupation<br>Independent Director            |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Loreen Arbus   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 8075 W 3rd St Ste 410   |  | <b>Transaction ID:</b> C1313146                               |  |
| City State Zip Code<br>Los Angeles CA 90048-4319  | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Arbus Productions   | Occupation<br>Dance Instructor               |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 96 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Beth B. Hunter

Mailing Address 3100 Miller Heights Rd

City State Zip Code  
Oakton VA 22124-1916

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

Name of Employer E\*Trade Financial Occupation Director, Treasury

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: C1314347

Amount of Each Receipt this Period  
500.00

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

Mailing Address 53 Concord Ave

City State Zip Code  
Glen Rock NJ 07452-1602

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

Name of Employer E\*Trade Financial Occupation Vice President, Relations Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: C1314447

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
William F. Lloyd

Mailing Address 500 College Rd

City State Zip Code  
Lake Forest IL 60045-2320

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

Name of Employer Deloitte & Touche, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: C1314467

Amount of Each Receipt this Period  
500.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 97 / 197                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Russell S. Elmer   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 12300 Rivers Edge Dr  |   | <b>Transaction ID:</b> C1314487                               |  |
| City State Zip Code<br>Potomac MD 20854-1072  | Amount of Each Receipt this Period<br>3000.00     |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>General Counsel/Corporate Secretary |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3000.00               |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Robert J. Simmons  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 5 Lake Potomac Ct   |   | <b>Transaction ID:</b> C1314507                               |  |
| City State Zip Code<br>Potomac MD 20854-1226  | Amount of Each Receipt this Period<br>2500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>CFO                             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Todd C. Mackay   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 2728 Chain Bridge Rd NW   |   | <b>Transaction ID:</b> C1314517                               |  |
| City State Zip Code<br>Washington DC 20016-3404   | Amount of Each Receipt this Period<br>2000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Executive Vice President        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00           |   |  |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 98 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Michael F. Connolly  |                                     | Date of Receipt<br>MM / DD / YYYY<br>04 / 17 / 2006 |
| Mailing Address Mintz, Levin, Cohn, Ferris, Glovsk<br>One Financial Center  |                                     | Transaction ID: C1314717                            |
| City Boston   | State MA                            | Zip Code 02111                                      |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>1000.00       |
| Name of Employer<br>Mintz Levin   | Occupation<br>Partner               |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Helen J. Wright  |                                     | Date of Receipt<br>MM / DD / YYYY<br>04 / 17 / 2006 |
| Mailing Address 55B Hancock St  |                                     | Transaction ID: C1314727                            |
| City Lexington  | State MA                            | Zip Code 02420-3442                                 |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>5000.00       |
| Name of Employer<br>N/A   | Occupation<br>Retired               |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Thomas D. Ruane  |                                     | Date of Receipt<br>MM / DD / YYYY<br>04 / 28 / 2006 |
| Mailing Address 610 Laguna Royale Blvd<br>Apt 1004  |                                     | Transaction ID: C1320197                            |
| City Naples   | State FL                            | Zip Code 34119-4680                                 |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>1000.00       |
| Name of Employer<br>St. John & Wayne  | Occupation<br>Attorney              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 99 / 197                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

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

Mailing Address 17 17th Ave

City San Francisco State CA Zip Code 94121-1315

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

Name of Employer Kenetech Corporation Occupation Investment Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
04 / 30 / 2006

Transaction ID: C1320207

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Daniel Seligson

Mailing Address 1741 Middlefield Road

City Palo Alto State CA Zip Code 94301

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

Name of Employer N/A Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
04 / 29 / 2006

Transaction ID: C1320257

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
E. Barrett Prettyman, Jr.

Mailing Address 2737 Devonshire PI NW Apt 424

City Washington State DC Zip Code 20008-3469

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

Name of Employer Hogan & Hartson Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
04 / 06 / 2006

Transaction ID: C1311987

Amount of Each Receipt this Period  
1000.00

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 100 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Linda M. Martinez

Mailing Address 1517 Washington Ave # 8

City State Zip Code  
Saint Louis MO 63103-1841

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

Name of Employer Occupation  
Bryan Cave, LLP Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315087

Amount of Each Receipt this Period  
250.00

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

Mailing Address 221 Papin Ave

City State Zip Code  
Saint Louis MO 63119-3715

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

Name of Employer Occupation  
Bryan Cave, LLP Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315097

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Randy L. Tripp

Mailing Address 12713 High Meadow Rd

City State Zip Code  
North Potomac MD 20878-3794

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

Name of Employer Occupation  
E\*Trade Financial Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315107

Amount of Each Receipt this Period  
1500.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 101 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Shayna Joson   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 19 / 2006 |  |
| Mailing Address 5 Rolling Meadows Ct  |  | <b>Transaction ID:</b> C1315137                          |  |
| City State Zip Code<br>Old Bridge NJ 08857-3082   | Amount of Each Receipt this Period<br>500.00 |  |  |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer<br>E*trade Financial   | Occupation<br>Vice President                 |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> James A. Morgulec  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 19 / 2006 |  |
| Mailing Address 4376 Westover PI NW   |  | <b>Transaction ID:</b> C1315157                          |  |
| City State Zip Code<br>Washington DC 20016-5552   | Amount of Each Receipt this Period<br>250.00 |  |  |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer<br>Department of Justice   | Occupation<br>Attorney                       |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Simon Lazarus, III   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 19 / 2006 |  |
| Mailing Address 8505 Rosewood Dr  |  | <b>Transaction ID:</b> C1315167                          |  |
| City State Zip Code<br>Bethesda MD 20814-1433   | Amount of Each Receipt this Period<br>250.00 |  |  |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer<br>Sidley Austin, LLP  | Occupation<br>Attorney                       |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |  |  |

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 102 / 197               |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Paul V. Gerlach

Mailing Address 2015 Hillyer PI NW

City State Zip Code  
Washington DC 20009-1005

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

Name of Employer Occupation  
Sidley Austin, LLP Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

**Transaction ID: C1315177**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Brendan Dillon

Mailing Address 655 Park Avenue

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
UBS Investment Banker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

**Transaction ID: C1315187**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Raj Maheshwari

Mailing Address 312 W 104th St

City State Zip Code  
New York NY 10025-4137

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

Name of Employer Occupation  
Charlestown Capital Managing Director

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

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 20 / 2006

**Transaction ID: C1315267**

Amount of Each Receipt this Period  
1000.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>6250.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 103 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                     |  |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. George R. Hornig</b>   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6                    |
| Mailing Address 1220 Park Ave<br>Apt 16D  |                                     | <b>Transaction ID: C1314737</b><br>Amount of Each Receipt this Period<br>1000.00 |
| City State Zip Code<br>New York NY 10128-1733   |                                     |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     |  |
| Name of Employer<br>Credit Suisse   | Occupation<br>Investment Management |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |  |

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Richard E. Young</b>   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6                   |
| Mailing Address 9767 Water Oak Dr   |                                    | <b>Transaction ID: C1315147</b><br>Amount of Each Receipt this Period<br>500.00 |
| City State Zip Code<br>Fairfax VA 22031-1029  |                                    |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    |   |
| Name of Employer<br>Sidley Austin, LLP  | Occupation<br>Attorney             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |

|   |                                     |  |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Arthur H. Aufses, III</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6                    |
| Mailing Address 510 E 86th St<br>Apt 18C  |                                     | <b>Transaction ID: C1315257</b><br>Amount of Each Receipt this Period<br>2000.00 |
| City State Zip Code<br>New York NY 10028-7508   |                                     |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     |  |
| Name of Employer<br>Kramer Levin Naftalis & Frankel LLP   | Occupation<br>Attorney              |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00 |  |

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

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 104 / 197               |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael D. Fraizer

Mailing Address 8305 Paigley Pl

City Richmond State VA Zip Code 23229-8429

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

Name of Employer GE Financial Assurance Occupation President/CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

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

**Transaction ID:** C1315347

Amount of Each Receipt this Period  
 3000.00

**B.** Full Name (Last, First, Middle Initial)  
Elliot Sydney Schewel

Mailing Address 4316 Gorman Dr

City Lynchburg State VA Zip Code 24503-1948

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

**Transaction ID:** C1315777

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
John L. Loeb, Jr.

Mailing Address 50 Broad St Rm 1137

City New York State NY Zip Code 10004-2378

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

Name of Employer Self Employed Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 2 8 / 2 0 0 6

**Transaction ID:** C1320187

Amount of Each Receipt this Period  
 2000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 6000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |



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

|  |   |                |
|--|---|----------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 105 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |                |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |                |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Gemma Valdez Daggatt

Mailing Address 933 N Northlake Way  
Boat 13

City State Zip Code  
Seattle WA 98103-8874

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

Name of Employer Occupation  
Self Employed Investor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5000.00

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

**Transaction ID:** C1315897

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 5145 Crystal Springs Dr NE

City State Zip Code  
Seattle WA 98110-2083

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

Name of Employer Occupation  
Cable Langenbach Kinerk & Bauer, LLP Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

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

**Transaction ID:** C1315907

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Scot B. Jarvis

Mailing Address 3825 Issaquah Pine Lake Rd SE

City State Zip Code  
Sammamish WA 98075

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

Name of Employer Occupation  
Cedar Grove Partners Principal

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5000.00

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

**Transaction ID:** C1315987

Amount of Each Receipt this Period  
2500.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 8000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 106 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Chris P. Varvares

Mailing Address 959 Morehouse Lane

City State Zip Code  
Saint Louis MO 63130-2158

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

Name of Employer  
Macroeconomic Consultants, Inc.

Occupation  
Economist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: C1311977

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Alison Cohen-Mittelstadt

Mailing Address 4618 Chestnut St

City State Zip Code  
Bethesda MD 20814-3724

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

Name of Employer  
E\*Trade Financial

Occupation  
Marketing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: C1311997

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Virginia A. Seitz

Mailing Address 2901 Kanawha St NW

City State Zip Code  
Washington DC 20015-1211

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

Name of Employer  
Sidley Austin, LLP

Occupation  
Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: C1312507

Amount of Each Receipt this Period  
500.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>6500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 107 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Craig B. Burton  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |
| Mailing Address 23 Pine Ln  |  | <b>Transaction ID:</b> C1312517                               |
| City State Zip Code<br>West Milford NJ 07480-2354   | Amount of Each Receipt this Period<br>500.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Finance                        |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Stephen D. Ramsey  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |
| Mailing Address 363 Old Post Rd   |   | <b>Transaction ID:</b> C1312547                               |
| City State Zip Code<br>Fairfield CT 06824-6644  | Amount of Each Receipt this Period<br>2500.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |   |   |
| Name of Employer<br>General Electric  | Occupation<br>Attorney                        |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Travis Morrison  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address PO Box 30   |   | <b>Transaction ID:</b> C1313117                               |
| City State Zip Code<br>West Plains MO 65775-0030  | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |   |   |
| Name of Employer<br>Stewart-Morrison Redi-Mix   | Occupation<br>Business Owner                  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 108 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Thomas R. Green  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 1830 Craig Park Ct  |   | <b>Transaction ID:</b> C1313127                               |  |
| City State Zip Code<br>Saint Louis MO 63146-4148  | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Self Employed   | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Lawrence Mestel  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 25 E End Ave<br>Number 10-E   |   | <b>Transaction ID:</b> C1313137                               |  |
| City State Zip Code<br>New York NY 10028-7052   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Primary Wave Music  | Occupation<br>Executive                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Charles Adams, Jr.   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |  |
| Mailing Address 43 Rue du Rhone<br>A1204  |   | <b>Transaction ID:</b> C1313147                               |  |
| City State Zip Code<br>Geneva, Switzerland  | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Hogan & Hartson   | Occupation<br>Attorney                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 109 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael A. Caplin

Mailing Address 8477 Portland Plaza

City State Zip Code  
Mc Lean VA 22102-1730

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

Name of Employer Time & Place Occupation  
Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2006

**Transaction ID:** C1302707

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Rachel Bedell

Mailing Address 3179 Key Blvd

City State Zip Code  
Arlington VA 22201-5041

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

Name of Employer E\*Trade Financial Occupation  
Director, Product Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
04 / 12 / 2006

**Transaction ID:** C1314348

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dennis E. Webb

Mailing Address 21457 Glebe View Dr

City State Zip Code  
Broadlands VA 20148-3609

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

Name of Employer E\*Trade Financial Occupation  
President, Capital Market

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2006

**Transaction ID:** C1314438

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 10500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

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

|  |  |                |
|--|--|----------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 110 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |                |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Scott M. Gelber</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 179 E 70th St<br>8C   |  | <b>Transaction ID: C1314448</b>                                 |  |
| City State Zip Code<br>New York NY 10021-5109   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Administration                 |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. William P. O'Neill</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 5119 Yuma St NW   |  | <b>Transaction ID: C1314478</b>                                 |  |
| City State Zip Code<br>Washington DC 20016-4336   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>Latham & Watkins  | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Peter N. Appel</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |  |
| Mailing Address 3165 20th St N  |  | <b>Transaction ID: C1314488</b>                                 |  |
| City State Zip Code<br>Arlington VA 22201-5135  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Director, US Retail            |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 111 / 197               |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Adam R. Townsend</b>   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 1209 O St NW<br>Apt 3   |                                    | <b>Transaction ID: C1314508</b>                                 |
| City Washington   | State DC                           | Zip Code 20005-4481   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    | Amount of Each Receipt this Period<br>500.00                    |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Vice President       |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Daniel B. Zwirn</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |
| Mailing Address 40 Central Park S<br>Ph D   |                                     | <b>Transaction ID: C1314718</b>                                 |
| City New York   | State NY                            | Zip Code 10019-1633   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>2500.00                   |
| Name of Employer<br>D.B. Zwirn Co.  | Occupation<br>Managing Partner      |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Jeffrey Robbins</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |
| Mailing Address Mintz, Levin, Cohn, Ferris, Glovsk<br>One Financial Center  |                                     | <b>Transaction ID: C1314728</b>                                 |
| City Boston   | State MA                            | Zip Code 02111  |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>1000.00                   |
| Name of Employer<br>Mintz Levin   | Occupation<br>Attorney              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 112 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Gayle Perkins Atkins   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 970 Park Ave  |   | <b>Transaction ID:</b> C1314738                          |  |
| City State Zip Code<br>New York NY 10028-0324   | Amount of Each Receipt this Period<br>1000.00 |  |  |
| FEC ID number of contributing federal political committee.<br>C   |   |  |  |
| Name of Employer<br>Self Employed   | Occupation<br>Consultant                      |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Mary Vaden Eisenstadt  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 18 / 2006 |  |
| Mailing Address 828 Navesink River Rd   |   | <b>Transaction ID:</b> C1314778                          |  |
| City State Zip Code<br>Rumson NJ 07760-2328   | Amount of Each Receipt this Period<br>5000.00 |  |  |
| FEC ID number of contributing federal political committee.<br>C   |   |  |  |
| Name of Employer<br>N/A   | Occupation<br>Homemaker                       |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Herbert C. Klein   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 28 / 2006 |  |
| Mailing Address 11 Brook Ridge Ct   |   | <b>Transaction ID:</b> C1320178                          |  |
| City State Zip Code<br>Cedar Grove NJ 07009-1641  | Amount of Each Receipt this Period<br>2000.00 |  |  |
| FEC ID number of contributing federal political committee.<br>C   |   |  |  |
| Name of Employer<br>Nowell Amoroso Klein Bierman, PA  | Occupation<br>Attorney                        |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3000.00           |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 8000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |



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

|  |  |                |
|--|--|----------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 113 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |                |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Dennis J. Enright</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |  |
| Mailing Address 136 Terrace Ave   |  | <b>Transaction ID: C1320198</b>                               |  |
| City State Zip Code<br>Jersey City NJ 07307-4149  |  | Amount of Each Receipt this Period<br>1000.00                 |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer Occupation<br>NW Financial Group Investment Banker   |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                           |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Ashlin T. Wilbanks</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 3 0 / 2 0 0 6 |  |
| Mailing Address 7437 Pinecroft Ln   |  | <b>Transaction ID: C1320208</b>                               |  |
| City State Zip Code<br>Norfolk VA 23505-3126  |  | Amount of Each Receipt this Period<br>5000.00                 |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer Occupation<br>N/A Homemaker  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>5000.00                           |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Frances Beatty Adler</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |  |
| Mailing Address 800 Park Ave  |  | <b>Transaction ID: C1320258</b>                               |  |
| City State Zip Code<br>New York NY 10021-2760   |  | Amount of Each Receipt this Period<br>1000.00                 |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer Occupation<br>RL Feigen & Co. Art Dealer   |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                           |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 114 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

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

Mailing Address 7241 Maryland Ave

City State Zip Code  
Saint Louis MO 63130-4419

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

Name of Employer Occupation  
Bryan Cave, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

Transaction ID: C1315098

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Connie Marie Dotson

Mailing Address 5150 Stirling St

City State Zip Code  
Granite Bay CA 95746-6149

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

Name of Employer Occupation  
E\*Trade Financial Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

Transaction ID: C1315108

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Adam Berman

Mailing Address 1734 Waller St

City State Zip Code  
San Francisco CA 94117-2728

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

Name of Employer Occupation  
Education Partners President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

Transaction ID: C1315128

Amount of Each Receipt this Period  
1000.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>3750.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 115 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael R. Baranowski

Mailing Address 13308 Balmoral Heights PI

City State Zip Code  
Clifton VA 20124-1544

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

Name of Employer Occupation  
FTI Consulting Economic Consultant

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315148

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mark E. Grummer

Mailing Address 5039 Eskridge Ter NW

City State Zip Code  
Washington DC 20016-3444

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

Name of Employer Occupation  
Kirkland & Ellis, LLP Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315168

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Eric Olsen

Mailing Address 1521 P St NW

City State Zip Code  
Washington DC 20005-1909

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

Name of Employer Occupation  
Patton Boggs, LLP Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: C1315178

Amount of Each Receipt this Period  
500.00

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

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

|  |   |                |
|--|---|----------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 116 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |                |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |                |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Claire Silberman

Mailing Address 28 Old Fulton Street 1J

City State Zip Code  
Brooklyn NY 11201

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

Name of Employer Self Employed Occupation  
Self Employed Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

Transaction ID: C1315188

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ariola Yushin Slaven

Mailing Address 226 Glen Ave

City State Zip Code  
Port Chester NY 10573-2525

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

Name of Employer E\*Trade Financial Occupation  
E\*Trade Financial Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 13 / 2006

Transaction ID: C1314518

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Andrew A. Fink

Mailing Address 70 E 77th St

City State Zip Code  
New York NY 10021-1811

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

Name of Employer Self Employed Occupation  
Self Employed Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 20 / 2006

Transaction ID: C1315258

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 117 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Jack M. Feder

Mailing Address 8016 River Falls Dr

City Potomac State MD Zip Code 20854-3842

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

Name of Employer Vestar Capital Partners Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: C1315268

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Jill Spalding

Mailing Address 475 Park Ave

City New York State NY Zip Code 10022-2045

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

Name of Employer Self Employed Occupation Writer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

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

Transaction ID: C1315278

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Dilip R. Desai

Mailing Address 3368 Eagle Nest Pt

City Virginia Beach State VA Zip Code 23452-6225

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

Name of Employer LTD Management Co. Inc. Occupation Hotel Development & Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: C1315348

Amount of Each Receipt this Period  
5000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 8000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 118 / 197               |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                                      |   |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Teresa M. Derichsweiler</b>  |                                      | Date of Receipt   |
| Mailing Address 3742 24th St  |                                      | <input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2006"/> |
| City  | State                                | Zip Code  |
| San Francisco   | CA                                   | 94114-3921  |
| FEC ID number of contributing federal political committee.  |                                      | Transaction ID: C1315428  |
| <input type="text" value="C"/>  |                                      | Amount of Each Receipt this Period  |
|   |                                      | <input type="text" value="1000.00"/>  |
| Name of Employer<br>CNet Networks, Inc.   | Occupation<br>Attorney               |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼             |   |
|   | <input type="text" value="1000.00"/> |   |

|   |                                      |   |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Robert Weintraub</b>   |                                      | Date of Receipt   |
| Mailing Address 126 Flat Rock Road  |                                      | <input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2006"/> |
| City  | State                                | Zip Code  |
| Easton  | CT                                   | 06612   |
| FEC ID number of contributing federal political committee.  |                                      | Transaction ID: C1315678  |
| <input type="text" value="C"/>  |                                      | Amount of Each Receipt this Period  |
|   |                                      | <input type="text" value="5000.00"/>  |
| Name of Employer<br>SSC, Inc.   | Occupation<br>Principal              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼             |   |
|   | <input type="text" value="5000.00"/> |   |

|   |                                      |   |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Robert G. Bergquist</b>  |                                      | Date of Receipt   |
| Mailing Address 3332 E Ford Pl  |                                      | <input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2006"/> |
| City  | State                                | Zip Code  |
| Seattle   | WA                                   | 98112-4225  |
| FEC ID number of contributing federal political committee.  |                                      | Transaction ID: C1315788  |
| <input type="text" value="C"/>  |                                      | Amount of Each Receipt this Period  |
|   |                                      | <input type="text" value="1000.00"/>  |
| Name of Employer<br>Widemile, Inc.  | Occupation<br>Manager                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼             |   |
|   | <input type="text" value="1000.00"/> |   |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="7000.00"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                 |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 119 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Harold D. Fowler

Mailing Address 2043 Killarney Way

City State Zip Code  
Bellevue WA 98004-7045

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

Name of Employer Occupation  
H.D. Fowler Company Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

**Transaction ID:** C1315898

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Frank M. Higgins, II.

Mailing Address 7650 SE 22nd St

City State Zip Code  
Mercer Island WA 98040-2119

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

Name of Employer Occupation  
Second Avenue Partners Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 6

**Transaction ID:** C1316068

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Harry T. Lester

Mailing Address 4139 First Court Rd

City State Zip Code  
Virginia Beach VA 23455-2848

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

Name of Employer Occupation  
EVMS President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

**Transaction ID:** C1316248

Amount of Each Receipt this Period  
5000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 120 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
George M. Cleland

Mailing Address 2140 Faculty Dr

City State Zip Code  
Winston Salem NC 27106-5222

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: C1316258

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3909 Garrison St NW

City State Zip Code  
Washington DC 20016-4219

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

Name of Employer Occupation  
US Dept. of HUD Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

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

Transaction ID: C1311968

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Christine Wolf

Mailing Address 1031 Willowleaf Way

City State Zip Code  
Potomac MD 20854-2937

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

Name of Employer Occupation  
E\*Trade Financial Executive Vice President

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

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

Transaction ID: C1311988

Amount of Each Receipt this Period  
250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                |
|--|---|----------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 121 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |                |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |                |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> John Q. Hearne   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 715 Broadway, Suite 320   |   | <b>Transaction ID:</b> C1312508                                 |  |
| City State Zip Code<br>Santa Monica CA 90401-2640   | Amount of Each Receipt this Period<br>3000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Paint Communications  | Occupation<br>Owner                           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>4946.78           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Michael S. Klana   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 305 2nd Ave Apt 306   |  | <b>Transaction ID:</b> C1312518                                 |  |
| City State Zip Code<br>New York NY 10003-2748   | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Manager                        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Erika S. Fine  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |  |
| Mailing Address 325 Tappan Street APT 3   |   | <b>Transaction ID:</b> C1312548                                 |  |
| City State Zip Code<br>Brookline MA 02445-5333  | Amount of Each Receipt this Period<br>2000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Thomson West  | Occupation<br>Business Executive              |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3000.00           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 5500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                |
|--|---|----------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 122 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |                |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |                |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Paul M. English

Mailing Address PO Box 275

City State Zip Code  
Arlington MA 02476-0003

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

Name of Employer Occupation  
CRU Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID:** C1312558

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 2285  
17535 Via de Fortuna

City State Zip Code  
Rancho Santa Fe CA 92067

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

Name of Employer Occupation  
Glenair Inc. President/Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID:** C1313108

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Kevin J. Lipson

Mailing Address 13624 Maidstone Ln

City State Zip Code  
Potomac MD 20854-1008

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

Name of Employer Occupation  
Hogan & Hartson Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID:** C1313148

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 123 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Gilda Ongkeko

Mailing Address 1713 Robson Ave

City State Zip Code  
Santa Monica CA 90405-5917

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

Name of Employer Occupation  
Self Employed Playground Designer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

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

Transaction ID: C1312009

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Stephen E. Courter

Mailing Address 16 Smith Rd

City State Zip Code  
Hopkinton MA 01748-2571

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

Name of Employer Occupation  
Courter Group Managing Partner

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: C1314419

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Michael Pizzi

Mailing Address 850 N Randolph St  
Number 1534

City State Zip Code  
Arlington VA 22203-4000

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

Name of Employer Occupation  
E\*Trade Financial Trader

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: C1314449

Amount of Each Receipt this Period  
250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 6250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 124 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Kenneth C Elder, Jr.   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 3309 Lauren Oaks Ct   |  | <b>Transaction ID:</b> C1314489                               |
| City State Zip Code<br>Oak Hill VA 20171-1744   | Amount of Each Receipt this Period<br>250.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Portfolio Manager              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Alvin L. Hayden  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 9961 Stone Vale Dr  |  | <b>Transaction ID:</b> C1314509                               |
| City State Zip Code<br>Vienna VA 22181-5932   | Amount of Each Receipt this Period<br>250.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Internal Auditor               |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> June J. Batcheller   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 6 |
| Mailing Address 883 N Kensington St   |  | <b>Transaction ID:</b> C1314519                               |
| City State Zip Code<br>Arlington VA 22205-1327  | Amount of Each Receipt this Period<br>500.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Compliance                     |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                |
|--|---|----------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 125 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |                |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |                |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Beth Rudin Dewoody   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 10 Gracie Sq  |  | <b>Transaction ID:</b> C1314709                          |  |
| City State Zip Code<br>New York NY 10028-8031   |  | Amount of Each Receipt this Period<br>1000.00            |  |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer Occupation<br>Rudin Mangement Co. Real Estate  |  |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                      |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Alexander C. Hitz  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 800 5th Ave   |  | <b>Transaction ID:</b> C1314719                          |  |
| City State Zip Code<br>New York NY 10021-7216   |  | Amount of Each Receipt this Period<br>1000.00            |  |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer Occupation<br>Self Employed Philanthropist   |  |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                      |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Allison W. Phinney, III.   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 17 / 2006 |  |
| Mailing Address 28 Princeton St   |  | <b>Transaction ID:</b> C1314729                          |  |
| City State Zip Code<br>Newton MA 02458-1833   |  | Amount of Each Receipt this Period<br>1000.00            |  |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer Occupation<br>Mintz Levin Attorney   |  |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00                      |  |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 126 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Cathryn A. Collins

Mailing Address 5 Beekman Pl

City State Zip Code  
New York NY 10022-8003

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

Name of Employer Self Employed Occupation Designer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2006

Transaction ID: C1314739

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1085 South Bay Shore Drive

City State Zip Code  
Virginia Beach VA 23451-3872

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2006

Transaction ID: C1314779

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Steven K. Rattner

Mailing Address 375 Park Ave

City State Zip Code  
New York NY 10152-0002

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

Name of Employer Quadrangle Group Occupation Managing Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2006

Transaction ID: C1320189

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 11000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 127 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
William M. Laufer

Mailing Address 9 Chestnut Dr

City State Zip Code  
Chester NJ 07930-2815

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

Name of Employer Occupation  
Laufer, Knapp, Torzewski & Dalena, LLC Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2006

Transaction ID: C1320199

Amount of Each Receipt this Period  
500.00

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

Mailing Address 27 Mountain Meadow Rd

City State Zip Code  
Woodside CA 94062-4413

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

Name of Employer Occupation  
Skadden Arps Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2006

Transaction ID: C1320259

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dan H. Ball

Mailing Address 39 Woodcrest Dr

City State Zip Code  
Saint Louis MO 63124-1467

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

Name of Employer Occupation  
Bryan Cave, LLP Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2006

Transaction ID: C1315089

Amount of Each Receipt this Period  
250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 128 / 197               |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Mark B. Leadlove   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |  |
| Mailing Address 723 Dougherty Pl  |  | <b>Transaction ID:</b> C1315099                               |  |
| City State Zip Code<br>Saint Louis MO 63122-2522  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Bryan Cave, LLP   | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Anthony J. Altobelli   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |  |
| Mailing Address 9 Sycamore Ln   |  | <b>Transaction ID:</b> C1315139                               |  |
| City State Zip Code<br>Fair Haven NJ 07704-3517   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>E*Trade Financial   | Occupation<br>National Sales Director        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> James F. Ireland, III  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |  |
| Mailing Address 7525 Hampden Ln   |  | <b>Transaction ID:</b> C1315179                               |  |
| City State Zip Code<br>Bethesda MD 20814-1331   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Cole Raywid & Braverman, LLP  | Occupation<br>Attorney                       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 129 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Laura Lofaro Freeman<br>Mailing Address 236 E 49th St<br>City State Zip Code<br>New York NY 10017-1502<br>FEC ID number of contributing federal political committee. <b>C</b> |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6<br><b>Transaction ID:</b> C1315259<br>Amount of Each Receipt this Period<br>300.00 |
| Name of Employer Occupation<br>Sterling Resources President<br>Receipt For: Aggregate Year-to-Date ▼<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ 300.00     |  |  |

|  |  |   |
|--|--|---|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Samuel M. Feder<br>Mailing Address 101 Central Park W<br>City State Zip Code<br>New York NY 10023-4250<br>FEC ID number of contributing federal political committee. <b>C</b> |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6<br><b>Transaction ID:</b> C1315269<br>Amount of Each Receipt this Period<br>5000.00 |
| Name of Employer Occupation<br>Morgan, Lewis & Bockus Attorney<br>Receipt For: Aggregate Year-to-Date ▼<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ 5000.00 |  |   |

|   |  |   |
|---|--|---|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Fred Shapss<br>Mailing Address 757 3rd Ave<br>Fl 6<br>City State Zip Code<br>New York NY 10017-2059<br>FEC ID number of contributing federal political committee. <b>C</b>             |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6<br><b>Transaction ID:</b> C1315279<br>Amount of Each Receipt this Period<br>1000.00 |
| Name of Employer Occupation<br>Rosen, Seymour, Shapss, Martin & Co. CPA<br>Receipt For: Aggregate Year-to-Date ▼<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ 1000.00 |  |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>6300.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 130 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
John C. Colligan

Mailing Address 710 Berkeley Ave

City State Zip Code  
Menlo Park CA 94025-2327

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

Name of Employer Occupation  
Accel Partners Venture Capitalist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 6

**Transaction ID:** C1316069

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Zander Lurie

Mailing Address 2792 Filbert St

City State Zip Code  
San Francisco CA 94123-3218

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

Name of Employer Occupation  
CNet Networks, Inc. Corporate Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

**Transaction ID:** C1315429

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
David Lahaie

Mailing Address 5400 W Marginal Way SW

City State Zip Code  
Seattle WA 98106-1517

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

Name of Employer Occupation  
Evergreen Recycling, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

**Transaction ID:** C1315779

Amount of Each Receipt this Period  
1000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 131 / 197               |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Wayne F. Wilbanks

Mailing Address 7437 Pinecroft Ln

City State Zip Code  
Norfolk VA 23505-3126

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

Name of Employer  
Wilbanks, Smith & Thomas  
Asset Managem

Occupation  
Managing Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

**Transaction ID:** C1320209

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 9234 NE 25th St

City State Zip Code  
Clyde Hill WA 98004-2134

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

Name of Employer  
Cedar Grove Investments

Occupation  
Investment Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID:** C1315899

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Kristen Jarvis

Mailing Address 3825 Issaquah Pine Lake Rd SE

City State Zip Code  
Sammamish WA 98075-7254

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

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

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

**Transaction ID:** C1315989

Amount of Each Receipt this Period  
2500.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 12500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 132 / 197               |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Brent Simonich

Mailing Address 2325 Hartford Ct

City State Zip Code  
El Dorado Hills CA 95762-5931

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

Name of Employer Occupation  
E\*Trade Financial Finance Manager

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

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

**Transaction ID:** C1311989

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Christopher Walling

Mailing Address 115 E 72nd St  
Apt 6C

City State Zip Code  
New York NY 10021-4260

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

Name of Employer Occupation  
Self Employed Jewelry Designer

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

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

**Transaction ID:** C1312509

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Andrew Solomon

Mailing Address 18 W 10th St

City State Zip Code  
New York NY 10011-8702

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

Name of Employer Occupation  
Self Employed Writer

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

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

**Transaction ID:** C1312519

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 133 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
G. Frank de Biasi

Mailing Address 229 Chrystie St  
Apt 921

City State Zip Code  
New York NY 10002-1176

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

Name of Employer Michael Graves Architect  
Occupation Decorator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: C1312549

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 47 E Lake Dr

City State Zip Code  
Katonah NY 10536-3501

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

Name of Employer The Pilot Group  
Occupation Managing Member

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: C1312559

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
David F. Sabino

Mailing Address 11 Georgetown Rd

City State Zip Code  
Chesterfield MO 63017-7919

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

Name of Employer Sabino Stringer & Assoc.  
Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: C1313119

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 11000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

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

|  |   |                |
|--|---|----------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 134 / 197 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |                |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |                |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>A. Donald E. McDonough   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address 629 West St   |   | Transaction ID: C1313149  |
| City State Zip Code<br>Duxbury MA 02332-3647  | FEC ID number of contributing federal political committee.<br>C | Amount of Each Receipt this Period<br>250.00                    |
| Name of Employer<br>E*Trade Financial   | Occupation<br>Director  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00                              |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>B. Carnahan Group, LLC   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address 905 Olive St Ste 1212   |   | Transaction ID: C1313109  |
| City State Zip Code<br>Saint Louis MO 63101-1418  | FEC ID number of contributing federal political committee.<br>C | Amount of Each Receipt this Period<br>5000.00                   |
| Name of Employer  | Occupation  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00                             | PARTNERSHIP--partners below if itemized                         |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>C. Tom Carnahan  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address 905 Olive Street Suite 1212   |   | Transaction ID: C1313110  |
| City State Zip Code<br>Saint Louis MO 63101-1418  | FEC ID number of contributing federal political committee.<br>C | Amount of Each Receipt this Period<br>5000.00                   |
| Name of Employer<br>Wind Capital Group  | Occupation<br>Partner   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00                             | [MEMO ITEM]   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 5250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 135 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 15  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Bonan Bros. Business  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address PO Box 309   |   | <b>Transaction ID:</b> C1313138                               |
| City State Zip Code<br>Mc Leansboro IL 62859-0309  | Amount of Each Receipt this Period<br>5000.00 |   |
| FEC ID number of contributing federal political committee.<br>C  |   |   |
| Name of Employer Occupation<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           | PARTNERSHIP--partners below if itemized                       |

|   |   |   |
|---|---|---|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>F. William Bonan |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address PO Box 309  |   | <b>Transaction ID:</b> C1313140                               |
| City State Zip Code<br>Mc Leansboro IL 62859-0309                     | Amount of Each Receipt this Period<br>2500.00 |   |
| FEC ID number of contributing federal political committee.<br>C       |   |   |
| Name of Employer Occupation<br>Peoples National Bank President        | Aggregate Year-to-Date ▼<br>5000.00           | [MEMO ITEM]   |

|  |   |   |
|--|---|---|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Hunt Bonan            |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address 100 N Hancock St   |   | <b>Transaction ID:</b> C1313139                               |
| City State Zip Code<br>Mc Leansboro IL 62859-1604                          | Amount of Each Receipt this Period<br>2500.00 |   |
| FEC ID number of contributing federal political committee.<br>C            |   |   |
| Name of Employer Occupation<br>Peoples National Bank Chairman of the Board | Aggregate Year-to-Date ▼<br>5000.00           | [MEMO ITEM]   |

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 136 / 197               |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Breezy Point Apartments

Mailing Address 8400 Hampton Blvd

City Norfolk State VA Zip Code 23505-1008

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C1316077

Amount of Each Receipt this Period  
 2500.00

PARTNERSHIP--partners below if itemized

**B.** Full Name (Last, First, Middle Initial)  
Donald L. Williams

Mailing Address 809 W Ocean View Ave

City Norfolk State VA Zip Code 23503-1348

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

Name of Employer Breezy Point Partners Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C1316080

Amount of Each Receipt this Period  
 1250.00

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
Kenneth Hoff

Mailing Address 9723 Bay Point Dr

City Norfolk State VA Zip Code 23518-2019

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

Name of Employer Breezy Point Partners Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C1316079

Amount of Each Receipt this Period  
 1250.00

[MEMO ITEM]

|  |   |           |
|--|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2500.00   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 650842.59 |



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

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

FOR LINE NUMBER: PAGE 137 / 197  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
INT'L. ASSOCIATION OF BRIDGE STRUCTURAL ORNAMENTAL

Mailing Address & REINFORCING IRON WORKS (IPAL)  
1750 New York Ave. NW

City State Zip Code  
Washington DC 20006-5301

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: C1313132

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Jean A. Carnahan Political Action Committee

Mailing Address PO Box 920

City State Zip Code  
Rolla MO 65402-0920

FEC ID number of contributing federal political committee. **C** C00364232

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: C1313133

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

**TOTAL** This Period (last page this line number only) ..... ► **6000.00**

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

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

FOR LINE NUMBER: PAGE 138 / 197

(check only one)

|                              |                              |                              |  |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Bank of America  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 3 0 / 2 0 0 6 |
| Mailing Address 1369 Chain Bridge Rd  |  | <b>Transaction ID:</b> C1320327                               |
| City State Zip Code<br>McLean VA 22101-3905   | Amount of Each Receipt this Period<br>15182.10     |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation<br>Aggregate Year-to-Date ▼<br>15805.72 | * Interest  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Bank of America  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 3 0 / 2 0 0 6 |
| Mailing Address 1369 Chain Bridge Rd  |  | <b>Transaction ID:</b> C1320329                               |
| City State Zip Code<br>McLean VA 22101-3905   | Amount of Each Receipt this Period<br>37.85        |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation<br>Aggregate Year-to-Date ▼<br>15805.72 | * Interest  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 15219.95 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | 15219.95 |

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

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

FOR LINE NUMBER: (check only one)

PAGE 139 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. The Waverly Group, Inc.</b>   |   | <b>Transaction ID:</b> D79430<br>Date of Disbursement   |
| Mailing Address 6849 Old Dominion Drive<br>Suite 222   |   | <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2006"/> |
| City McLean  | State VA  | Zip Code 22101-3724   |
| Purpose of Disbursement<br>PAC Admin/Compliance Svcs.  | <input type="text" value="001"/><br>Category/Type   |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |
|  |   | Amount of Each Disbursement this Period<br><input type="text" value="7663.36"/>                       |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Standard Parking</b>  |   | <b>Transaction ID:</b> D76560<br>Date of Disbursement   |
| Mailing Address 108 N Fairfax Street   |   | <input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2006"/> |
| City Alexandria  | State VA  | Zip Code 22314-3224   |
| Purpose of Disbursement<br>Parking   | <input type="text" value="001"/><br>Category/Type   |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |
|  |   | Amount of Each Disbursement this Period<br><input type="text" value="1450.00"/>                       |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Baer Communications, LLC</b>  |   | <b>Transaction ID:</b> D76630<br>Date of Disbursement   |
| Mailing Address 2120 L St NW<br>Suite 305  |   | <input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2006"/> |
| City Washington  | State DC  | Zip Code 20037-1527   |
| Purpose of Disbursement<br>Consulting Services Fee   | <input type="text" value="001"/><br>Category/Type   |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |
|  |   | Amount of Each Disbursement this Period<br><input type="text" value="10000.00"/>                      |

|  |                                       |
|--|---------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="19113.36"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                  |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 140 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Campaign Finance Consultants</b>  |  | <b>Transaction ID:</b> D76920<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 6 |
| Mailing Address 10 G St NE<br>Ste 470  |  | Amount of Each Disbursement this Period<br>10489.45  |
| City Washington State DC Zip Code 20002-8038   |  |  |
| Purpose of Disbursement Fundraising Consulting Services<br>Candidate Name  |  | 003<br>Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MSHC Partners, Inc.</b>   |  | <b>Transaction ID:</b> D77040<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 0 7 / 2 0 0 6 |
| Mailing Address 1101 14th St NW<br>Third Floor   |  | Amount of Each Disbursement this Period<br>1115.00   |
| City Washington State DC Zip Code 20005-5601   |  |  |
| Purpose of Disbursement Printing<br>Candidate Name   |  | 001<br>Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MSHC Partners, Inc.</b>   |  | <b>Transaction ID:</b> D78180<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address 1101 14th St NW<br>Third Floor   |  | Amount of Each Disbursement this Period<br>2580.00   |
| City Washington State DC Zip Code 20005-5601   |  |  |
| Purpose of Disbursement Marketing Campaign<br>Candidate Name   |  | 004<br>Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 14184.45 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....    |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 141 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Angelique R. Cannon</b>   |  | <b>Transaction ID: D78200</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6                            |
| Mailing Address 7209 Flower Tuft Ct  |  | Amount of Each Disbursement this Period<br>3154.46   |
| City Springfield State VA Zip Code 22153-1508  | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type<br>001 |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Dominic Gabello</b>   |  | <b>Transaction ID: D78210</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6                            |
| Mailing Address 6409 Lee Hwy   |  | Amount of Each Disbursement this Period<br>788.57  |
| City Arlington State VA Zip Code 22205-1921  | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type<br>001 |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Talya Stein</b>   |  | <b>Transaction ID: D78220</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6                            |
| Mailing Address 211 Oronoco St   |  | Amount of Each Disbursement this Period<br>2513.84   |
| City Alexandria State VA Zip Code 22314-2017   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type<br>001 |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 6456.87     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box] |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 142 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Ricoh Business Systems</b>  |  | <b>Transaction ID:</b> D78320<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 8 / 2 0 0 6 |
| Mailing Address PO Box 905804  |  | Amount of Each Disbursement this Period<br>1224.00   |
| City Charlotte State NC Zip Code 28290-5804  | Purpose of Disbursement<br>Equipment Maintenance<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Loren Lipman</b>  |  | <b>Transaction ID:</b> D78330<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 9 / 2 0 0 6 |
| Mailing Address 289 Cameron Station Blvd   |  | Amount of Each Disbursement this Period<br>3131.17   |
| City Alexandria State VA Zip Code 22304-7792   | Purpose of Disbursement<br>Catering/Events<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>003   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Geneka Holyfield</b>  |  | <b>Transaction ID:</b> D78610<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6 |
| Mailing Address 1118 Staples St NE   |  | Amount of Each Disbursement this Period<br>88.00   |
| City Washington State DC Zip Code 20002-3922   | Purpose of Disbursement<br>Parking Reimbursement<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001   |

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

4443.17

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Ritz-Carlton St. Louis</b>   |  | <b>Transaction ID: D78650</b>          |  |
| Mailing Address 100 Carondelet Plz  |  | Date of Disbursement<br>04 / 21 / 2006 |  |
| City<br>Saint Louis   | State<br>MO  | Zip Code<br>63105-3434                 | Amount of Each Disbursement this Period<br>2460.39 |
| Purpose of Disbursement<br>Catering/Events  |  | 003<br>Category/<br>Type               |  |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State:<br>District:   |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Standard Parking</b>   |  | <b>Transaction ID: D78810</b>          |  |
| Mailing Address 108 N Fairfax Street  |  | Date of Disbursement<br>04 / 26 / 2006 |  |
| City<br>Alexandria  | State<br>VA  | Zip Code<br>22314-3224                 | Amount of Each Disbursement this Period<br>1450.00 |
| Purpose of Disbursement<br>Parking  |  | 001<br>Category/<br>Type               |  |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State:<br>District:   |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Mr. Noble Ackerson</b>   |  | <b>Transaction ID: D78890</b>          |  |
| Mailing Address 220 Century Pl Apt 3423   |  | Date of Disbursement<br>04 / 28 / 2006 |  |
| City<br>Alexandria  | State<br>VA  | Zip Code<br>22304-7509                 | Amount of Each Disbursement this Period<br>2377.70 |
| Purpose of Disbursement<br>Salary   |  | 001<br>Category/<br>Type               |  |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State:<br>District:   |  |  |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>6288.09</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |                  |  |                          |
|---|------------------|--|--------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Sheryl Edwards</b>   |                  | <b>Transaction ID: D78900</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6                                  |                          |
| Mailing Address 8605 Barron St  |                  | Amount of Each Disbursement this Period<br>870.16  |                          |
| City Takoma Park  | State MD         | Zip Code 20912-7247  | Category/<br>Type<br>001 |
| Purpose of Disbursement<br>Salary   |                  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |
| Candidate Name  |                  |  |                          |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                          |

|   |                  |  |                          |
|---|------------------|--|--------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Brett Schenker</b>   |                  | <b>Transaction ID: D78910</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6                                  |                          |
| Mailing Address 1045 N Utah St<br>Apt 204   |                  | Amount of Each Disbursement this Period<br>699.07  |                          |
| City Arlington  | State VA         | Zip Code 22201-5752  | Category/<br>Type<br>001 |
| Purpose of Disbursement<br>Salary   |                  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |
| Candidate Name  |                  |  |                          |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                          |

|   |                  |  |                          |
|---|------------------|--|--------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Brian R. Cannon</b>  |                  | <b>Transaction ID: D78201</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6                                  |                          |
| Mailing Address 3800 N. Fairfax Dr<br>Apt 1105  |                  | Amount of Each Disbursement this Period<br>1283.86   |                          |
| City Arlington  | State VA         | Zip Code 22203-1705  | Category/<br>Type<br>001 |
| Purpose of Disbursement<br>Salary   |                  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |
| Candidate Name  |                  |  |                          |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                          |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2853.09 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 145 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Talya Stein</b>   |  | Transaction ID: D78911<br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 28 / 2006 |  |
| Mailing Address 211 Oronoco St   |  | Amount of Each Disbursement this Period<br>2513.85                                 |  |
| City Alexandria<br>State VA<br>Zip Code 22314-2017   | Purpose of Disbursement<br>Salary<br>Candidate Name  | 001<br>Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Pringle Communications Group</b>  |  | Transaction ID: D76561<br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2006 |  |
| Mailing Address 717 D St NW<br>Fifth Floor   |  | Amount of Each Disbursement this Period<br>4000.00                                 |  |
| City Washington<br>State DC<br>Zip Code 20004-2804   | Purpose of Disbursement<br>Communication Consulting Services<br>Candidate Name   | 001<br>Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

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|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Katz Watson Group, Inc.</b>   |  | Transaction ID: D76601<br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 03 / 2006 |  |
| Mailing Address 236 Massachusetts Ave NE<br>Ste 206  |  | Amount of Each Disbursement this Period<br>10000.00                                |  |
| City Washington<br>State DC<br>Zip Code 20002-4980   | Purpose of Disbursement<br>Fundraising Consulting Services<br>Candidate Name   | 003<br>Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 16513.85    |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box] |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. The Presidio Corporation</b>  |  | <b>Transaction ID: D77041</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 7 / 2 0 0 6 |
| Mailing Address 7601 Ora Glen Dr<br>Ste 100  |  | Amount of Each Disbursement this Period<br>416.34   |
| City Greenbelt State MD Zip Code 20770-3620  |  |   |
| Purpose of Disbursement Shipping Expense<br>Candidate Name   | 001<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Peake Delancey Printers, LLC</b>  |  | <b>Transaction ID: D78181</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address 2500 Schuster Dr   |  | Amount of Each Disbursement this Period<br>295.23   |
| City Hyattsville State MD Zip Code 20781-1123  |  |   |
| Purpose of Disbursement Postage<br>Candidate Name  | 003<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Geneka Holyfield</b>  |  | <b>Transaction ID: D78211</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 1118 Staples St NE   |  | Amount of Each Disbursement this Period<br>1080.54  |
| City Washington State DC Zip Code 20002-3922   |  |   |
| Purpose of Disbursement Salary<br>Candidate Name   | 001<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1792.11     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Ms. Kelly T. Thomasson</b>  |  | <b>Transaction ID: D78221</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2006 |
| Mailing Address 331A N Patrick St  |  | Amount of Each Disbursement this Period<br>1888.99  |
| City Alexandria State VA Zip Code 22314-2442   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type: 001   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Ellen Qualls</b>  |  | <b>Transaction ID: D78241</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 17 / 2006 |
| Mailing Address 304 Prince St  |  | Amount of Each Disbursement this Period<br>862.08   |
| City Alexandria State VA Zip Code 22314-3316   | Purpose of Disbursement Travel/Lodging Reimbursement<br>Candidate Name<br>Category/Type: 002                                   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Peter D. Hart Research Assoc., Inc.</b>   |  | <b>Transaction ID: D78321</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 18 / 2006 |
| Mailing Address 1724 Connecticut Ave Nw  |  | Amount of Each Disbursement this Period<br>63000.00                                       |
| City Washington State DC Zip Code 20009-1103   | Purpose of Disbursement Public Opinion Research<br>Candidate Name<br>Category/Type: 005  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 65751.07    |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| <b>A. Rusty Foster</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 109 Sargent Rd<br>City Peaks Island State ME Zip Code 04108-1045<br>Purpose of Disbursement Web Hosting<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78651</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>1050.00<br>Category/Type<br>001 |
|--|--|---|

|  |  |   |
|--|--|---|
| <b>B. Katz Watson Group, Inc.</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 236 Massachusetts Ave NE Ste 206<br>City Washington State DC Zip Code 20002-4980<br>Purpose of Disbursement Travel/Lodging Reimbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78811</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>7903.69<br>Category/Type<br>002 |
|--|--|---|

|   |  |   |
|---|--|---|
| <b>C. Gale N. Brundrett, III</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 214 E Duncan Ave # A<br>City Alexandria State VA Zip Code 22301-1728<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78891</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>1779.45<br>Category/Type<br>001 |
|---|--|---|

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

10733.14

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| <b>A. Casey Fitzmaurice</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1860 N Scott St<br>Number 441<br>City Arlington State VA Zip Code 22209-1322<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78901</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>1139.52<br>001<br>Category/<br>Type |
|---|--|---|

|  |  |  |
|--|--|--|
| <b>B. Mr. Edward L. Bridge</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 9 Brook Bay Rd<br>City Mercer Island State WA Zip Code 98040-4621<br>Purpose of Disbursement Catering/Events<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D79431</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 4 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>833.67<br>003<br>Category/<br>Type<br>* in-kind received |
|--|--|--|

|  |  |   |
|--|--|---|
| <b>C. RealCo</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 201 N Union St<br>Suite 110<br>City Alexandria State VA Zip Code 22314-2642<br>Purpose of Disbursement Office Supplies<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D76602</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 3 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>15.00<br>001<br>Category/<br>Type |
|--|--|---|

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>1988.19</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 150 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. SparkList</b>   |   | <b>Transaction ID:</b> D76672<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 0 5 / 2 0 0 6                        |
| Mailing Address PO Box 49023   |   | Amount of Each Disbursement this Period<br>1500.00  |
| City San Jose State CA Zip Code 95161-9023   | Purpose of Disbursement<br>Email List Hosting<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |   | Category/Type<br>004  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CareFirst BlueCross BlueShield</b>  |  | <b>Transaction ID:</b> D78152<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 1 / 2 0 0 6                        |
| Mailing Address PO Box 79749   |  | Amount of Each Disbursement this Period<br>4982.33  |
| City Baltimore State MD Zip Code 21279-0749  | Purpose of Disbursement<br>Insurance<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |  | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. The Jefferson Hotel</b>   |  | <b>Transaction ID:</b> D78182<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6                        |
| Mailing Address 101 W Franklin St  |  | Amount of Each Disbursement this Period<br>10000.00   |
| City Richmond State VA Zip Code 23220-5028   | Purpose of Disbursement<br>Catering/Events Deposit<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |  | Category/Type<br>003  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 16482.33 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty)  |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 151 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |   |
|---|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Ryan Childress</b>   |  | <b>Transaction ID: D78202</b>                            |   |
| Mailing Address 8 Kennedy St  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2006 |   |
| City<br>Alexandria  | State<br>VA  | Zip Code<br>22305-2517                                   | Amount of Each Disbursement this Period<br>743.83 |
| Purpose of Disbursement<br>Salary   |  | <input type="text" value="001"/>                         |   |
| Candidate Name  |  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |
| State: District:  |  |  |   |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Craig B. Kirby</b>   |  | <b>Transaction ID: D78212</b>                            |  |
| Mailing Address 1770 Kilbourne PI NW  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2006 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20010-2606                                   | Amount of Each Disbursement this Period<br>3347.67 |
| Purpose of Disbursement<br>Salary   |  | <input type="text" value="001"/>                         |  |
| Candidate Name  |  | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:  |  |  |  |

|   |  |  |   |
|---|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Jacqueline Vignali</b>   |  | <b>Transaction ID: D78222</b>                            |   |
| Mailing Address 509 Queen St  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2006 |   |
| City<br>Alexandria  | State<br>VA  | Zip Code<br>22314-2512                                   | Amount of Each Disbursement this Period<br>962.54 |
| Purpose of Disbursement<br>Salary   |  | <input type="text" value="001"/>                         |   |
| Candidate Name  |  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |
| State: District:  |  |  |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>5054.04</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 152 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MSHC Partners, Inc.</b>   |  | <b>Transaction ID: D78242</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |
| Mailing Address 1101 14th St NW<br>Third Floor   |  | Amount of Each Disbursement this Period<br>470.00   |
| City Washington State DC Zip Code 20005-5601   | Purpose of Disbursement Printing<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Federal Express</b>   |  | <b>Transaction ID: D78322</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 8 / 2 0 0 6 |
| Mailing Address PO Box 371461  |  | Amount of Each Disbursement this Period<br>38.82  |
| City Pittsburgh State PA Zip Code 15250-7461   | Purpose of Disbursement Delivery/Courier<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. RealCo</b>  |  | <b>Transaction ID: D78602</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6 |
| Mailing Address 201 N Union St<br>Suite 110  |  | Amount of Each Disbursement this Period<br>1647.24  |
| City Alexandria State VA Zip Code 22314-2642   | Purpose of Disbursement Office Supplies<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2156.06 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 153 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. RooseveltMedia.com</b>  |  | <b>Transaction ID: D78652</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6                               |
| Mailing Address 1000 Richmond Rd   |  | Amount of Each Disbursement this Period<br>199.00   |
| City Lexington State KY Zip Code 40502-1610  | Purpose of Disbursement Dues/Subscriptions<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |  | Category/Type<br>001  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mintz Levin</b>   |   | <b>Transaction ID: D78752</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 5 / 2 0 0 6                               |
| Mailing Address 1 Financial Ctr  |   | Amount of Each Disbursement this Period<br>521.08   |
| City Boston State MA Zip Code 02111-2621   | Purpose of Disbursement Catering/Events<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |   | Category/Type<br>003  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Hungerford Printers</b>   |  | <b>Transaction ID: D78812</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6                               |
| Mailing Address 2207 Shannon Pl SE   |  | Amount of Each Disbursement this Period<br>1575.68  |
| City Washington State DC Zip Code 20020-5739   | Purpose of Disbursement Printing<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |  | Category/Type<br>003  |

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|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2295.76 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 154 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Angelique R. Cannon</b>   |  | <b>Transaction ID: D78892</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 7209 Flower Tuft Ct  |  | Amount of Each Disbursement this Period<br>3154.46  |
| City Springfield State VA Zip Code 22153-1508  | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type<br>001   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Dominic Gabello</b>   |  | <b>Transaction ID: D78902</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 6409 Lee Hwy   |  | Amount of Each Disbursement this Period<br>788.57   |
| City Arlington State VA Zip Code 22205-1921  | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type<br>001   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Tracy Sturman</b>   |  | <b>Transaction ID: D78912</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 1217 Yale St   |  | Amount of Each Disbursement this Period<br>2701.82  |
| City Santa Monica State CA Zip Code 90404-1575   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type<br>001   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 6644.85 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 155 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Puente Latino Group</b>   |  | <b>Transaction ID: D76603</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 3 / 2 0 0 6 |
| Mailing Address PO Box 33943   |  | Amount of Each Disbursement this Period<br>1000.00  |
| City Washington State DC Zip Code 20033-0943   | Purpose of Disbursement Translation Services<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Political Technologies, LLC</b>   |  | <b>Transaction ID: D76673</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 5 / 2 0 0 6 |
| Mailing Address PO Box 5792  |  | Amount of Each Disbursement this Period<br>5000.00  |
| City Vancouver State WA Zip Code 98668-5792  | Purpose of Disbursement Computer Consulting Services<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LexisNexis</b>  |  | <b>Transaction ID: D78153</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 1 / 2 0 0 6 |
| Mailing Address PO Box 7247-7090   |  | Amount of Each Disbursement this Period<br>300.00   |
| City Philadelphia State PA Zip Code 19170-0001   | Purpose of Disbursement Internet Research Service<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |         |
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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 6300.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Christopher T. Coffman</b>  |  | <b>Transaction ID: D78203</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |  |
| Mailing Address 3823 Linda Ln  |  | Amount of Each Disbursement this Period<br>537.40   |  |
| City Annandale State VA Zip Code 22003-1513  | Purpose of Disbursement Salary<br>Candidate Name   | 001<br>Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Ms. Jenny Nadicksbernd</b>  |  | <b>Transaction ID: D78213</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |  |
| Mailing Address 1045 N. Utah Street Apt. 305   |  | Amount of Each Disbursement this Period<br>2408.00  |  |
| City Arlington State VA Zip Code 22201-5710  | Purpose of Disbursement Salary<br>Candidate Name   | 001<br>Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. RealCo</b>  |  | <b>Transaction ID: D78243</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6 |  |
| Mailing Address 201 N Union St Suite 110   |  | Amount of Each Disbursement this Period<br>15.00  |  |
| City Alexandria State VA Zip Code 22314-2642   | Purpose of Disbursement Office Supplies<br>Candidate Name  | 001<br>Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2960.40 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Casey Fitzmaurice</b>   |  | <b>Transaction ID: D78603</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |
| Mailing Address 1860 N Scott St<br>Number 441  |  | Amount of Each Disbursement this Period<br>435.35   |
| City Arlington State VA Zip Code 22209-1322  | Category/<br>Type<br>002   |   |
| Purpose of Disbursement<br>Travel/Lodging Reimbursement  |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Office Paper Systems, Inc.</b>  |  | <b>Transaction ID: D78653</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6 |
| Mailing Address 7650 Airpark Rd  |  | Amount of Each Disbursement this Period<br>130.00   |
| City Gaithersburg State MD Zip Code 20879-4156   | Category/<br>Type<br>001   |   |
| Purpose of Disbursement<br>Recycle Services  |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Katherine Buchanan</b>  |  | <b>Transaction ID: D78813</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6 |
| Mailing Address 102 Lake Cook Dr   |  | Amount of Each Disbursement this Period<br>6700.00  |
| City Alexandria State VA Zip Code 22304-6451   | Category/<br>Type<br>001   |   |
| Purpose of Disbursement<br>Accounting/Compliance Services  |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 7265.35 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 158 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| <b>A. Brian R. Cannon</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3800 N. Fairfax Dr<br>Apt 1105<br>City Arlington State VA Zip Code 22203-1705<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78893</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>1283.86<br>001<br>Category/<br>Type |
|--|--|---|

|  |  |   |
|--|--|---|
| <b>B. Geneka Holyfield</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1118 Staples St NE<br>City Washington State DC Zip Code 20002-3922<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78903</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>1080.54<br>001<br>Category/<br>Type |
|--|--|---|

|   |  |   |
|---|--|---|
| <b>C. Ms. Kelly T. Thomasson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 331A N Patrick St<br>City Alexandria State VA Zip Code 22314-2442<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78913</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>1888.98<br>001<br>Category/<br>Type |
|---|--|---|

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 4253.38 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 159 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Nate L Wilcox</b>   |   | <b>Transaction ID: D76604</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 3 / 2 0 0 6 |
| Mailing Address 110 Cameron St<br>Apt 104  |   | Amount of Each Disbursement this Period<br>142.80   |
| City Alexandria State VA Zip Code 22314-3275   |   |   |
| Purpose of Disbursement Office Supplies Reimbursement<br>Candidate Name  |   | 001<br>Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. NGP Software, Inc.</b>  |   | <b>Transaction ID: D78154</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 1 / 2 0 0 6 |
| Mailing Address 1101 Vermont Ave NW<br>Ste 710   |   | Amount of Each Disbursement this Period<br>5190.00  |
| City Washington State DC Zip Code 20005-3521   |   |   |
| Purpose of Disbursement Broadcast Email<br>Candidate Name  |   | 004<br>Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Joshua M Cohn</b>   |   | <b>Transaction ID: D78204</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 5 Kennedy St   |   | Amount of Each Disbursement this Period<br>1251.80  |
| City Alexandria State VA Zip Code 22305-2518   |   |   |
| Purpose of Disbursement Salary<br>Candidate Name   |   | 001<br>Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 6584.60 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Alper Ozinal</b>  |   | <b>Transaction ID: D78214</b>                            |  |
| Mailing Address 6621 Wakefield Dr<br>Number 108  |   | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2006 |  |
| City Alexandria  | State VA  | Zip Code 22307-6876                                      | Amount of Each Disbursement this Period<br>1375.65 |
| Purpose of Disbursement<br>Salary  |   | <input type="text" value="001"/>                         |  |
| Candidate Name   |   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:   |   |  |  |

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Nate L Wilcox</b>   |   | <b>Transaction ID: D78224</b>                            |  |
| Mailing Address 110 Cameron St<br>Apt 104  |   | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2006 |  |
| City Alexandria  | State VA  | Zip Code 22314-3275                                      | Amount of Each Disbursement this Period<br>2068.65 |
| Purpose of Disbursement<br>Salary  |   | <input type="text" value="001"/>                         |  |
| Candidate Name   |   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:   |   |  |  |

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. GMMB</b>  |   | <b>Transaction ID: D78244</b>                            |  |
| Mailing Address PO Box 7777  |   | Date of Disbursement<br>MM / DD / YYYY<br>04 / 17 / 2006 |  |
| City Philadelphia  | State PA  | Zip Code 19175-0061                                      | Amount of Each Disbursement this Period<br>2500.00 |
| Purpose of Disbursement<br>Video Production  |   | <input type="text" value="004"/>                         |  |
| Candidate Name   |   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:   |   |  |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>5944.30</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 161 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
|--|---|---|---|--------|---|---|---|---|---|---|---|---|---|---------------|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial)  |   | <b>Transaction ID:</b> D78324   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| <b>A. Category 4 Design</b>  |   | Date of Disbursement  |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Mailing Address 1 Snl Plz Ste 103  |   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> |   | M      | M | / | D | D | / | Y | Y | Y | Y | 0             | 4 |  | 1 | 8 |  | 2 | 0 | 0 | 6 |
| M  | M | /   | D | D      | / | Y | Y | Y | Y |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| 0  | 4 |   | 1 | 8      |   | 2 | 0 | 0 | 6 |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| City Charlottesville State VA Zip Code 22902-5150  |   | Amount of Each Disbursement this Period   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Website Consulting Services  |   | <table border="1"> <tr> <td colspan="10">287.50</td> </tr> </table>   |   | 287.50 |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| 287.50   |   |   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Candidate Name   |   | <table border="1"> <tr> <td colspan="10">001</td> </tr> <tr> <td colspan="10">Category/Type</td> </tr> </table>   |   | 001    |   |   |   |   |   |   |   |   |   | Category/Type |   |  |   |   |  |   |   |   |   |
| 001  |   |   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Category/Type  |   |   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| State: District:   |   |   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |

|  |   |   |   |         |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
|--|---|---|---|---------|---|---|---|---|---|---|---|---|---|---------------|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial)  |   | <b>Transaction ID:</b> D78654   |   |         |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| <b>B. GMMB</b>   |   | Date of Disbursement  |   |         |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 7777  |   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> |   | M       | M | / | D | D | / | Y | Y | Y | Y | 0             | 4 |  | 2 | 1 |  | 2 | 0 | 0 | 6 |
| M  | M | /   | D | D       | / | Y | Y | Y | Y |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| 0  | 4 |   | 2 | 1       |   | 2 | 0 | 0 | 6 |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| City Philadelphia State PA Zip Code 19175-0061   |   | Amount of Each Disbursement this Period   |   |         |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Video Production   |   | <table border="1"> <tr> <td colspan="10">2675.00</td> </tr> </table>  |   | 2675.00 |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| 2675.00  |   |   |   |         |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Candidate Name   |   | <table border="1"> <tr> <td colspan="10">004</td> </tr> <tr> <td colspan="10">Category/Type</td> </tr> </table>   |   | 004     |   |   |   |   |   |   |   |   |   | Category/Type |   |  |   |   |  |   |   |   |   |
| 004  |   |   |   |         |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Category/Type  |   |   |   |         |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  |   |         |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| State: District:   |   |   |   |         |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |

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|--|---|---|---|--------|---|---|---|---|---|---|---|---|---|---------------|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial)  |   | <b>Transaction ID:</b> D78764   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| <b>C. Flowers, Inc.</b>  |   | Date of Disbursement  |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Mailing Address 1508 6th St NW   |   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> |   | M      | M | / | D | D | / | Y | Y | Y | Y | 0             | 4 |  | 2 | 7 |  | 2 | 0 | 0 | 6 |
| M  | M | /   | D | D      | / | Y | Y | Y | Y |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| 0  | 4 |   | 2 | 7      |   | 2 | 0 | 0 | 6 |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20001-2421   |   | Amount of Each Disbursement this Period   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Catering/Events  |   | <table border="1"> <tr> <td colspan="10">237.94</td> </tr> </table>   |   | 237.94 |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| 237.94   |   |   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Candidate Name   |   | <table border="1"> <tr> <td colspan="10">003</td> </tr> <tr> <td colspan="10">Category/Type</td> </tr> </table>   |   | 003    |   |   |   |   |   |   |   |   |   | Category/Type |   |  |   |   |  |   |   |   |   |
| 003  |   |   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Category/Type  |   |   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |
| State: District:   |   |   |   |        |   |   |   |   |   |   |   |   |   |               |   |  |   |   |  |   |   |   |   |

|  |   |   |         |
|--|---|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | <table border="1"><tr><td>3200.44</td></tr></table> | 3200.44 |
| 3200.44  |   |   |         |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | <table border="1"><tr><td></td></tr></table>        |         |
|  |   |   |         |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Ryan Childress</b>  |  | <b>Transaction ID: D78894</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 8 Kennedy St   |  | Amount of Each Disbursement this Period<br>743.82   |
| City Alexandria State VA Zip Code 22305-2517   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type<br>001   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Craig B. Kirby</b>  |  | <b>Transaction ID: D78904</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 1770 Kilbourne PI NW   |  | Amount of Each Disbursement this Period<br>3347.66  |
| City Washington State DC Zip Code 20010-2606   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type<br>001   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Jacqueline Vignali</b>  |  | <b>Transaction ID: D78914</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 509 Queen St   |  | Amount of Each Disbursement this Period<br>962.55   |
| City Alexandria State VA Zip Code 22314-2512   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type<br>001   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 5054.03     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 163 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mattox Commercial Photography</b>   |   | <b>Transaction ID: D78245</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 7 / 2 0 0 6                               |
| Mailing Address 5021 Seminary Rd   |   | Amount of Each Disbursement this Period<br>229.50   |
| City Alexandria State VA Zip Code 22311-1945   | Purpose of Disbursement<br>Photography Services<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |   | Category/Type<br>003  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Columbia Capital, LLC</b>   |  | <b>Transaction ID: D78655</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6                               |
| Mailing Address 201 North Union Street Suite 300   |  | Amount of Each Disbursement this Period<br>889.40   |
| City Alexandria State VA Zip Code 22314-2650   | Purpose of Disbursement<br>Telephone<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |  | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Katherine Buchanan</b>  |  | <b>Transaction ID: D76645</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 4 / 2 0 0 6                               |
| Mailing Address 102 Lake Cook Dr   |  | Amount of Each Disbursement this Period<br>899.81   |
| City Alexandria State VA Zip Code 22304-6451   | Purpose of Disbursement<br>Office Supplies/Postage Reimbursement<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |  | Category/Type<br>001  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2018.71 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]     |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 164 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Paras Productions, Inc.</b>   |  | <b>Transaction ID: D78155</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 1 / 2 0 0 6 |
| Mailing Address 6801 Whittier Ave<br>Ste 205   |  | Amount of Each Disbursement this Period<br>1256.40  |
| City McLean State VA Zip Code 22101-4534   |  |   |
| Purpose of Disbursement<br>Catering/Events   | Category/<br>Type<br>003   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Scott A. Price</b>  |  | <b>Transaction ID: D78185</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address 8705 Curtis Ave<br>Unit 407  |  | Amount of Each Disbursement this Period<br>2077.10  |
| City Alexandria State VA Zip Code 22309-2003   |  |   |
| Purpose of Disbursement<br>Travel/Lodging Reimbursement  | Category/<br>Type<br>002   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mr. Scott Darling</b>   |  | <b>Transaction ID: D78205</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 3267 N St NW<br>Apt 3  |  | Amount of Each Disbursement this Period<br>4527.93  |
| City Washington State DC Zip Code 20007-2839   |  |   |
| Purpose of Disbursement<br>Salary  | Category/<br>Type<br>001   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>7861.43</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Nicholas D. Perrins</b>   |  | <b>Transaction ID: D78215</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 1830 S St NW   |  | Amount of Each Disbursement this Period<br>1736.99  |
| City Washington State DC Zip Code 20009-6123   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type 001  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Tracy Sturman</b>   |  | <b>Transaction ID: D78225</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 1217 Yale St   |  | Amount of Each Disbursement this Period<br>2824.92  |
| City Santa Monica State CA Zip Code 90404-1575   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type 001  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Blue Consulting, LLC</b>  |  | <b>Transaction ID: D78605</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6 |
| Mailing Address 6700 Lupine Ln   |  | Amount of Each Disbursement this Period<br>10000.00   |
| City McLean State VA Zip Code 22101-1577   | Purpose of Disbursement Website Consulting Services<br>Candidate Name<br>Category/Type 001                                     |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 14561.91    |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box] |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Hungerford Printers</b>   |  | <b>Transaction ID: D78765</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 7 / 2 0 0 6                               |
| Mailing Address 2207 Shannon PI SE   |  | Amount of Each Disbursement this Period<br>2413.22  |
| City Washington State DC Zip Code 20020-5739   | Purpose of Disbursement Printing<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |  | Category/Type<br>003  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Christopher T. Coffman</b>  |  | <b>Transaction ID: D78895</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6                               |
| Mailing Address 3823 Linda Ln  |  | Amount of Each Disbursement this Period<br>537.40   |
| City Annandale State VA Zip Code 22003-1513  | Purpose of Disbursement Salary<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |  | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Ms. Jenny Nadicksbernd</b>  |  | <b>Transaction ID: D78905</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6                               |
| Mailing Address 1045 N. Utah Street Apt. 305   |  | Amount of Each Disbursement this Period<br>2408.00  |
| City Arlington State VA Zip Code 22201-5710  | Purpose of Disbursement Salary<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|  |  | Category/Type<br>001  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 5358.62 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Nate L Wilcox</b>   |  | <b>Transaction ID: D78915</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 110 Cameron St<br>Apt 104  |  | Amount of Each Disbursement this Period<br>2068.65  |
| City Alexandria State VA Zip Code 22314-3275   |  |   |
| Purpose of Disbursement Salary<br>Candidate Name   | 001<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Ellen Qualls</b>  |  | <b>Transaction ID: D78216</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 304 Prince St  |  | Amount of Each Disbursement this Period<br>4017.35  |
| City Alexandria State VA Zip Code 22314-3316   |  |   |
| Purpose of Disbursement Salary<br>Candidate Name   | 001<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Joshua M Cohn</b>   |  | <b>Transaction ID: D78896</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 5 Kennedy St   |  | Amount of Each Disbursement this Period<br>1251.79  |
| City Alexandria State VA Zip Code 22305-2518   |  |   |
| Purpose of Disbursement Salary<br>Candidate Name   | 001<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 7337.79     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Gale N. Brundrett, III</b>  |  | <b>Transaction ID: D76606</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 03 / 2006 |
| Mailing Address 214 E Duncan Ave # A   |  | Amount of Each Disbursement this Period<br>4836.00  |
| City Alexandria State VA Zip Code 22301-1728   | Purpose of Disbursement Internet Development/Strategy<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Brett Schenker</b>  |  | <b>Transaction ID: D76646</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 04 / 2006 |
| Mailing Address 1045 N Utah St Apt 204   |  | Amount of Each Disbursement this Period<br>103.28   |
| City Arlington State VA Zip Code 22201-5752  | Purpose of Disbursement Office Supplies Reimbursement<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. NGP Software, Inc.</b>  |  | <b>Transaction ID: D76916</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 06 / 2006 |
| Mailing Address 1101 Vermont Ave NW Ste 710  |  | Amount of Each Disbursement this Period<br>4650.00  |
| City Washington State DC Zip Code 20005-3521   | Purpose of Disbursement Database Support<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

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|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 9589.28 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 169 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Ankit N. Desai</b>  |  | <b>Transaction ID: D78206</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 1815 10th St NW<br>Apt B   |  | Amount of Each Disbursement this Period<br>1862.32  |
| City Washington State DC Zip Code 20001-5028   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type 001  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ADP</b>   |  | <b>Transaction ID: D78226</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 5800 Windward Pkwy   |  | Amount of Each Disbursement this Period<br>27052.31   |
| City Alpharetta State GA Zip Code 30005-8802   | Purpose of Disbursement Payroll Taxes<br>Candidate Name<br>Category/Type 001   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Baker's Best</b>  |  | <b>Transaction ID: D78606</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6 |
| Mailing Address 27 Lincoln St  |  | Amount of Each Disbursement this Period<br>426.06   |
| City Newton Highlands State MA Zip Code 02461-1526   | Purpose of Disbursement Catering/Events<br>Candidate Name<br>Category/Type 003   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 29340.69 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]      |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 170 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| <b>A. Alper Ozinal</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 6621 Wakefield Dr<br>Number 108<br>City Alexandria State VA Zip Code 22307-6876<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78906</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>1375.65<br>Category/Type<br>001 |
|---|--|---|

|  |  |  |
|--|--|--|
| <b>B. CitationShares</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5 American Ln<br>City Greenwich State CT Zip Code 06831-2551<br>Purpose of Disbursement Air Transportation<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D79426</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>19952.00<br>Category/Type<br>002 |
|--|--|--|

|  |  |   |
|--|--|---|
| <b>C. T-Mobile</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 742596<br>City Cincinnati State OH Zip Code 45274-2596<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D76647</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 4 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>75.63<br>Category/Type<br>001 |
|--|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 21403.28    |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 171 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Monica Dixon</b>   |  | <b>Transaction ID: D78207</b>                            |  |
| Mailing Address 5113 Duvall Dr  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2006 |  |
| City<br>Bethesda  | State<br>MD  | Zip Code<br>20816-1877                                   | Amount of Each Disbursement this Period<br>4053.14 |
| Purpose of Disbursement<br>Salary   |  | 001<br>Category/<br>Type                                 |  |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:  |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Ms. Mary A. Reiley</b>   |  | <b>Transaction ID: D78217</b>                            |  |
| Mailing Address 501 Slaters Ln Apt 701  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2006 |  |
| City<br>Alexandria  | State<br>VA  | Zip Code<br>22314-1117                                   | Amount of Each Disbursement this Period<br>2226.69 |
| Purpose of Disbursement<br>Salary   |  | 001<br>Category/<br>Type                                 |  |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:  |  |  |  |

|   |  |  |   |
|---|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Audra Tafoya</b>   |  | <b>Transaction ID: D78607</b>                            |   |
| Mailing Address 4513 4th Rd N   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 21 / 2006 |   |
| City<br>Arlington   | State<br>VA  | Zip Code<br>22203-2345                                   | Amount of Each Disbursement this Period<br>850.00 |
| Purpose of Disbursement<br>Travel/Lodging Reimbursement   |  | 002<br>Category/<br>Type                                 |   |
| Candidate Name  |  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |
| State: District:  |  |  |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>7129.83</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 172 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Scott Darling</b>   |   | <b>Transaction ID: D78897</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 3267 N St NW<br>Apt 3  |   | Amount of Each Disbursement this Period<br>4527.93  |
| City Washington State DC Zip Code 20007-2839   |   |   |
| Purpose of Disbursement Salary<br>Candidate Name   | 001<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Nicholas D. Perrins</b>   |   | <b>Transaction ID: D78907</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 1830 S St NW   |   | Amount of Each Disbursement this Period<br>1736.99  |
| City Washington State DC Zip Code 20009-6123   |   |   |
| Purpose of Disbursement Salary<br>Candidate Name   | 001<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. PPOM GP, Inc.</b>   |   | <b>Transaction ID: D79427</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address PO Box 1659<br>56 Rose Crown   |   | Amount of Each Disbursement this Period<br>965.20   |
| City Avon State CO Zip Code 81620-1659   |   |   |
| Purpose of Disbursement Air Transportation:Travel 4/25/06<br>Candidate Name  | 002<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 7230.12 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

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

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

FOR LINE NUMBER: (check only one)

PAGE 173 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Bank of America</b>   |   | <b>Transaction ID:</b> D79447<br>Date of Disbursement   |
| Mailing Address 1369 Chain Bridge Rd   |   | <input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2006"/> |
| City McLean  | State VA  | Zip Code 22101-3905   |
| Purpose of Disbursement<br>Bank Fee  | <input type="text" value="001"/><br>Category/Type   |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |
|  |   | Amount of Each Disbursement this Period<br><input type="text" value="12.10"/>                         |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Geneka Holyfield</b>  |   | <b>Transaction ID:</b> D77038<br>Date of Disbursement   |
| Mailing Address 1118 Staples St NE   |   | <input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2006"/> |
| City Washington  | State DC  | Zip Code 20002-3922   |
| Purpose of Disbursement<br>Parking Reimbursement   | <input type="text" value="001"/><br>Category/Type   |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |
|  |   | Amount of Each Disbursement this Period<br><input type="text" value="88.00"/>                         |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. The Presidio Corporation</b>  |   | <b>Transaction ID:</b> D76608<br>Date of Disbursement   |
| Mailing Address 7601 Ora Glen Dr<br>Ste 100  |   | <input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2006"/> |
| City Greenbelt   | State MD  | Zip Code 20770-3620   |
| Purpose of Disbursement<br>Telephone Equipment   | <input type="text" value="001"/><br>Category/Type   |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |
|  |   | Amount of Each Disbursement this Period<br><input type="text" value="7426.80"/>                       |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="7526.90"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                 |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 174 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Christopher T. Coffman</b>  |  | <b>Transaction ID: D76648</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 04 / 2006 |
| Mailing Address 3823 Linda Ln  |  | Amount of Each Disbursement this Period<br>25.37  |
| City Annandale State VA Zip Code 22003-1513  | Purpose of Disbursement<br>Travel Reimbursement<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>003  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Ms. Jenny Nadicksbernd</b>  |  | <b>Transaction ID: D76918</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 06 / 2006 |
| Mailing Address 1045 N. Utah Street Apt. 305   |  | Amount of Each Disbursement this Period<br>150.00   |
| City Arlington State VA Zip Code 22201-5710  | Purpose of Disbursement<br>Telephone Reimbursement<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ADP</b>   |  | <b>Transaction ID: D78198</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 13 / 2006 |
| Mailing Address 5800 Windward Pkwy   |  | Amount of Each Disbursement this Period<br>106.02   |
| City Alpharetta State GA Zip Code 30005-8802   | Purpose of Disbursement<br>Payroll Service Charge<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 281.39      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 175 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Sheryl Edwards</b>  |  | <b>Transaction ID: D78208</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |  |
| Mailing Address 8605 Barron St   |  | Amount of Each Disbursement this Period<br>870.16   |  |
| City Takoma Park<br>State MD<br>Zip Code 20912-7247  | Purpose of Disbursement<br>Salary<br>Candidate Name  | 001<br>Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Brett Schenker</b>  |  | <b>Transaction ID: D78218</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |  |
| Mailing Address 1045 N Utah St<br>Apt 204  |  | Amount of Each Disbursement this Period<br>699.08   |  |
| City Arlington<br>State VA<br>Zip Code 22201-5752  | Purpose of Disbursement<br>Salary<br>Candidate Name  | 001<br>Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Peake Delancey Printers, LLC</b>  |  | <b>Transaction ID: D78328</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 8 / 2 0 0 6 |  |
| Mailing Address 2500 Schuster Dr   |  | Amount of Each Disbursement this Period<br>494.91   |  |
| City Hyattsville<br>State MD<br>Zip Code 20781-1123  | Purpose of Disbursement<br>Postage<br>Candidate Name   | 003<br>Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2064.15 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 176 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Ms. Mary A. Reiley</b>  |  | <b>Transaction ID: D78608</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6 |
| Mailing Address 501 Slaters Ln<br>Apt 701  |  | Amount of Each Disbursement this Period<br>2914.24  |
| City Alexandria State VA Zip Code 22314-1117   |  |   |
| Purpose of Disbursement<br>Travel/Lodging Reimbursement  | Category/<br>Type<br>002   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ADP</b>   |  | <b>Transaction ID: D78888</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 7 / 2 0 0 6 |
| Mailing Address 5800 Windward Pkwy   |  | Amount of Each Disbursement this Period<br>102.38   |
| City Alpharetta State GA Zip Code 30005-8802   |  |   |
| Purpose of Disbursement<br>Payroll Service Charge  | Category/<br>Type<br>001   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mr. Ankit N. Desai</b>  |  | <b>Transaction ID: D78898</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 1815 10th St NW<br>Apt B   |  | Amount of Each Disbursement this Period<br>1862.33  |
| City Washington State DC Zip Code 20001-5028   |  |   |
| Purpose of Disbursement<br>Salary  | Category/<br>Type<br>001   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 4878.95 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 177 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Ellen Qualls</b>  |  | <b>Transaction ID: D78908</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 28 / 2006 |
| Mailing Address 304 Prince St  |  | Amount of Each Disbursement this Period<br>4017.34  |
| City Alexandria State VA Zip Code 22314-3316   | Purpose of Disbursement Salary<br>Candidate Name<br>Category/Type 001  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Caplin &amp; Drysdale</b>   |  | <b>Transaction ID: D79428</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 28 / 2006 |
| Mailing Address 1 Thomas Cir NW Ste 1100   |  | Amount of Each Disbursement this Period<br>1001.94  |
| City Washington State DC Zip Code 20005-5812   | Purpose of Disbursement Legal Services<br>Candidate Name<br>Category/Type 001  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Bank of America</b>   |  | <b>Transaction ID: D79448</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 04 / 2006 |
| Mailing Address 1369 Chain Bridge Rd   |  | Amount of Each Disbursement this Period<br>3426.89  |
| City McLean State VA Zip Code 22101-3905   | Purpose of Disbursement Credit Card Fees<br>Candidate Name<br>Category/Type 001  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 8446.17 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 178 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Richard L. Feigen</b>   |  | <b>Transaction ID: D79508</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 18 / 2006 |
| Mailing Address 34 E 69th St   |  | Amount of Each Disbursement this Period<br>2539.72  |
| City New York State NY Zip Code 10021-5016   | Purpose of Disbursement<br>Catering/Events<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | * in-kind received  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ADP</b>   |  | <b>Transaction ID: D78179</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 12 / 2006 |
| Mailing Address 5800 Windward Pkwy   |  | Amount of Each Disbursement this Period<br>14.00  |
| City Alpharetta State GA Zip Code 30005-8802   | Purpose of Disbursement<br>Payroll Service Charge<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ADP</b>   |  | <b>Transaction ID: D78889</b><br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 28 / 2006 |
| Mailing Address 5800 Windward Pkwy   |  | Amount of Each Disbursement this Period<br>29403.21                                       |
| City Alpharetta State GA Zip Code 30005-8802   | Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>31956.93</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....           |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 179 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RealCo</b>  |  | <b>Transaction ID:</b> D76559<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 0 1 / 2 0 0 6 |
| Mailing Address 201 N Union St<br>Suite 110  |  | Amount of Each Disbursement this Period<br>8972.20   |
| City Alexandria State VA Zip Code 22314-2642   |  |  |
| Purpose of Disbursement<br>Rent  | Category/<br>Type<br>001   |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Ankit N. Desai</b>  |  | <b>Transaction ID:</b> D76609<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 0 3 / 2 0 0 6 |
| Mailing Address 1815 10th St NW<br>Apt B   |  | Amount of Each Disbursement this Period<br>514.00  |
| City Washington State DC Zip Code 20001-5028   |  |  |
| Purpose of Disbursement<br>Parking Reimbursement   | Category/<br>Type<br>001   |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Gale N. Brundrett, III</b>  |  | <b>Transaction ID:</b> D78199<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 214 E Duncan Ave<br># A  |  | Amount of Each Disbursement this Period<br>1934.05   |
| City Alexandria State VA Zip Code 22301-1728   |  |  |
| Purpose of Disbursement<br>Salary  | Category/<br>Type<br>001   |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 11420.25 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....    |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 180 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Casey Fitzmaurice</b>   |  | <b>Transaction ID: D78209</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 1860 N Scott St<br>Number 441  |  | Amount of Each Disbursement this Period<br>1139.52  |
| City Arlington State VA Zip Code 22209-1322  |  |   |
| Purpose of Disbursement Salary<br>Candidate Name   | 001<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Scott A. Price</b>  |  | <b>Transaction ID: D78319</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 8 / 2 0 0 6 |
| Mailing Address 8705 Curtis Ave<br>Unit 407  |  | Amount of Each Disbursement this Period<br>757.46   |
| City Alexandria State VA Zip Code 22309-2003   |  |   |
| Purpose of Disbursement Travel/Lodging Reimbursement<br>Candidate Name   | 002<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Atlantic Telecommunications Corp.</b>   |  | <b>Transaction ID: D78609</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 1 / 2 0 0 6 |
| Mailing Address PO Box 4145  |  | Amount of Each Disbursement this Period<br>1000.00  |
| City Manassas State VA Zip Code 20108-0717   |  |   |
| Purpose of Disbursement Telephone System Installation<br>Candidate Name  | 001<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2896.98 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Federal Express</b>   |  | <b>Transaction ID:</b> D78809<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 2 6 / 2 0 0 6 |
| Mailing Address PO Box 371461  |  | Amount of Each Disbursement this Period<br>59.19   |
| City Pittsburgh State PA Zip Code 15250-7461   | Purpose of Disbursement Delivery/Courier<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Monica Dixon</b>  |  | <b>Transaction ID:</b> D78899<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 5113 Duvall Dr   |  | Amount of Each Disbursement this Period<br>4053.14   |
| City Bethesda State MD Zip Code 20816-1877   | Purpose of Disbursement Salary<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Ms. Mary A. Reiley</b>  |  | <b>Transaction ID:</b> D78909<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 501 Slaters Ln Apt 701   |  | Amount of Each Disbursement this Period<br>2226.69   |
| City Alexandria State VA Zip Code 22314-1117   | Purpose of Disbursement Salary<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 6339.02 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Walker Management, LLC</b>  |  | <b>Transaction ID: D79429</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 4 / 2 0 0 6 |
| Mailing Address 4733 Bethesda Ave Ste 400  |  | Amount of Each Disbursement this Period<br>7196.00  |
| City Bethesda State MD Zip Code 20814-5278   | Purpose of Disbursement Air Transportation:Travel 4/7/06<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>002  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. American Express</b>  |  | <b>Transaction ID: D79449</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 4 / 2 0 0 6 |
| Mailing Address PO Box 53852   |  | Amount of Each Disbursement this Period<br>4020.98  |
| City Phoenix State AZ Zip Code 85072-3852  | Purpose of Disbursement Credit Card Fees<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. American Express</b>  |  | <b>Transaction ID: D76651</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 4 / 2 0 0 6 |
| Mailing Address PO Box 1270  |  | Amount of Each Disbursement this Period<br>14800.55   |
| City Phoenix State AZ Zip Code 85001-1270  | Purpose of Disbursement See Below<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type   |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 26017.53 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]      |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |
|---|--|--|
| <b>A. Delta Airlines</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 20706<br>City Atlanta State GA Zip Code 30320-6001<br>Purpose of Disbursement Airfare<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Transaction ID: D76671<br>Date of Disbursement<br>04 / 03 / 2006<br>Amount of Each Disbursement this Period<br>362.10<br>[MEMO ITEM] |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |  | Category/Type<br>002   |

|  |  |   |
|--|--|---|
| <b>B. American Airlines</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 619616<br>City Dallas State TX Zip Code 75261-9616<br>Purpose of Disbursement Airfare<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Transaction ID: D76662<br>Date of Disbursement<br>04 / 07 / 2006<br>Amount of Each Disbursement this Period<br>1127.60<br>[MEMO ITEM] |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |  | Category/Type<br>002  |

|   |  |  |
|---|--|--|
| <b>C. The Charles Hotel</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1 Bennett St<br>City Cambridge State MA Zip Code 02138-5707<br>Purpose of Disbursement Travel/Lodging<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Transaction ID: D76653<br>Date of Disbursement<br>04 / 01 / 2006<br>Amount of Each Disbursement this Period<br>600.00<br>[MEMO ITEM] |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |  | Category/Type<br>002   |

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 184 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. US Airways</b>  |  | Transaction ID: D76663<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 2 / 2 0 0 6 |
| Mailing Address 2345 Crystal Dr  |  | Amount of Each Disbursement this Period<br>2481.98   |
| City Arlington State VA Zip Code 22227-0001  | Purpose of Disbursement Airfare<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |
| Category/Type: 002   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. United Airlines</b>   |  | Transaction ID: D76664<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 2 / 2 0 0 6 |
| Mailing Address 1200 E Algonquin Rd  |  | Amount of Each Disbursement this Period<br>180.33  |
| City Arlington Heights State IL Zip Code 60005-4712  | Purpose of Disbursement Airfare<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |
| Category/Type: 002   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Dell Computers</b>  |  | Transaction ID: D76665<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 3 / 2 0 0 6 |
| Mailing Address PO Box 9020  |  | Amount of Each Disbursement this Period<br>703.39  |
| City Des Moines State IA Zip Code 50368-0001   | Purpose of Disbursement Computer Equipment<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |
| Category/Type: 001   |  |  |

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 185 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| <b>A. Umbria</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 295 Franklin St<br>City Boston State MA Zip Code 02110-3105<br>Purpose of Disbursement Catering/Events<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Transaction ID: D76655<br>Date of Disbursement<br>04 / 05 / 2006<br>Amount of Each Disbursement this Period<br>1000.00<br>[MEMO ITEM] |
|--|--|---|

|   |  |  |
|---|--|--|
| <b>B. Talbot Hotel</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 20 E Delaware Pl<br>City Chicago State IL Zip Code 60611-4938<br>Purpose of Disbursement Travel/Lodging<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Transaction ID: D76656<br>Date of Disbursement<br>04 / 01 / 2006<br>Amount of Each Disbursement this Period<br>765.86<br>[MEMO ITEM] |
|---|--|--|

|   |  |   |
|---|--|---|
| <b>C. Peninsula Hotel</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 108 E Superior St<br>City Chicago State IL Zip Code 60611-2508<br>Purpose of Disbursement Travel/Lodging<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Transaction ID: D76657<br>Date of Disbursement<br>04 / 01 / 2006<br>Amount of Each Disbursement this Period<br>1101.00<br>[MEMO ITEM] |
|---|--|---|

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 186 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Midwest Airlines</b>  |  | Transaction ID: D76667<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 1 / 2 0 0 6 |
| Mailing Address 6744 S Howell Ave  |  | Amount of Each Disbursement this Period<br>931.60  |
| City Oak Creek State WI Zip Code 53154-1422  | Purpose of Disbursement Airfare<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Staples</b>   |  | Transaction ID: D76658<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 4 / 2 0 0 6 |
| Mailing Address PO Box 9020  |  | Amount of Each Disbursement this Period<br>629.57  |
| City Des Moines State IA Zip Code 50368-0001   | Purpose of Disbursement Office Supplies<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Cort Furniture</b>  |  | Transaction ID: D76668<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 3 / 2 0 0 6 |
| Mailing Address 5710 General Washington Dr   |  | Amount of Each Disbursement this Period<br>2039.87   |
| City Alexandria State VA Zip Code 22312-2416   | Purpose of Disbursement Office Furniture<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 187 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. US Postmaster</b>   |  | Transaction ID: D76669<br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 03 / 2006 |
| Mailing Address 1100 Wythe St  |  | Amount of Each Disbursement this Period<br>2340.00                                 |
| City Alexandria State VA Zip Code 22314-1843   | Purpose of Disbursement Postage<br>Candidate Name<br>Category/Type 001   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. American Express</b>  |  | Transaction ID: D78261<br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 17 / 2006 |
| Mailing Address PO Box 1270  |  | Amount of Each Disbursement this Period<br>14833.07                                |
| City Phoenix State AZ Zip Code 85001-1270  | Purpose of Disbursement See Below<br>Candidate Name<br>Category/Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Apple</b>   |  | Transaction ID: D78260<br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 10 / 2006 |
| Mailing Address 1 Infinite Loop  |  | Amount of Each Disbursement this Period<br>10324.12                                |
| City Cupertino State CA Zip Code 95014-2083  | Purpose of Disbursement Computer Equipment<br>Candidate Name<br>Category/Type 001  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 14833.07 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]      |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 188 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |   |
|---|--|---|
| <b>A. Marriott</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 200 W 12th St<br>City Kansas City State MO Zip Code 64105-1638<br>Purpose of Disbursement Travel/Lodging<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78262</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 1 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>442.82<br>[MEMO ITEM] |
|---|--|---|

|  |  |   |
|--|--|---|
| <b>B. Roll Call</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 50 F St NW Ste 700<br>City Washington State DC Zip Code 20001-1530<br>Purpose of Disbursement Dues/Subscriptions<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78272</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 5 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>589.00<br>[MEMO ITEM] |
|--|--|---|

|   |  |   |
|---|--|---|
| <b>C. Bittersweet Catering</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 823 King St<br>City Alexandria State VA Zip Code 22314-3016<br>Purpose of Disbursement Catering/Events<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78263</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>120.98<br>[MEMO ITEM] |
|---|--|---|

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 189 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |
|---|--|--|
| <b>A. Umbria</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 295 Franklin St<br>City Boston State MA Zip Code 02110-3105<br>Purpose of Disbursement Catering/Events<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78264</b><br>Date of Disbursement<br>04 / 05 / 2006<br>Amount of Each Disbursement this Period<br>781.26<br><b>[MEMO ITEM]</b> |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>B. Ritz-Carlton St. Louis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 100 Carondelet Plz<br>City Saint Louis State MO Zip Code 63105-3434<br>Purpose of Disbursement Travel/Lodging<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78265</b><br>Date of Disbursement<br>04 / 04 / 2006<br>Amount of Each Disbursement this Period<br>243.21<br><b>[MEMO ITEM]</b> |
|--|--|--|

|   |  |  |
|---|--|--|
| <b>C. Marriott</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 200 W 12th St<br>City Kansas City State MO Zip Code 64105-1638<br>Purpose of Disbursement Travel/Lodging<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78266</b><br>Date of Disbursement<br>04 / 09 / 2006<br>Amount of Each Disbursement this Period<br>257.48<br><b>[MEMO ITEM]</b> |
|---|--|--|

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 190 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| <b>A. The Pfister</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 424 E Wisconsin Ave<br>City Milwaukee State WI Zip Code 53202-4405<br>Purpose of Disbursement Travel/Lodging<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78267</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 9 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>273.89<br><b>[MEMO ITEM]</b> |
|--|--|--|

|  |  |   |
|--|--|---|
| <b>B. Staples</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 9020<br>City Des Moines State IA Zip Code 50368-0001<br>Purpose of Disbursement Office Supplies<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78268</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>1408.82<br><b>[MEMO ITEM]</b> |
|--|--|---|

|  |  |   |
|--|--|---|
| <b>C. MBNA America</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 15019<br>City Wilmington State DE Zip Code 19886-5019<br>Purpose of Disbursement See Below<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D78706</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 4 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>7254.18 |
|--|--|---|

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|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 7254.18 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 191 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. United Airlines</b>   |   | Transaction ID: D78710<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 0 / 2 0 0 6 |
| Mailing Address 1200 E Algonquin Rd  |   | Amount of Each Disbursement this Period<br>340.97  |
| City<br>Arlington Heights  | State<br>IL   |  |
| Zip Code<br>60005-4712   |   | [MEMO ITEM]  |
| Purpose of Disbursement<br>Airfare   |   |  |
| Candidate Name   |   | 002<br>Category/Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. US Airways</b>  |   | Transaction ID: D78711<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address 2345 Crystal Dr  |   | Amount of Each Disbursement this Period<br>1782.03   |
| City<br>Arlington  | State<br>VA   |  |
| Zip Code<br>22227-0001   |   | [MEMO ITEM]  |
| Purpose of Disbursement<br>Airfare   |   |  |
| Candidate Name   |   | 002<br>Category/Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Alaska Air</b>  |   | Transaction ID: D78712<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 2 / 2 0 0 6 |
| Mailing Address PO Box 68900   |   | Amount of Each Disbursement this Period<br>722.31  |
| City<br>Seattle  | State<br>WA   |  |
| Zip Code<br>98168-0900   |   | [MEMO ITEM]  |
| Purpose of Disbursement<br>Airfare   |   |  |
| Candidate Name   |   | 002<br>Category/Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 192 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|   |  |  |
|---|--|--|
| <b>A. Staples</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3301 Jefferson Davis Hwy<br>City Alexandria State VA Zip Code 22305-3044<br>Purpose of Disbursement Office Supplies<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Transaction ID: D78723<br>Date of Disbursement<br>04 / 21 / 2006<br>Amount of Each Disbursement this Period<br>628.22<br>[MEMO ITEM] |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>B. Northwest Airlines</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 7500 Airline Dr<br>City Minneapolis State MN Zip Code 55450-1101<br>Purpose of Disbursement Airfare<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Transaction ID: D78714<br>Date of Disbursement<br>04 / 13 / 2006<br>Amount of Each Disbursement this Period<br>420.21<br>[MEMO ITEM] |
|--|--|--|

|   |  |  |
|---|--|--|
| <b>C. Alaska Air</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 68900<br>City Seattle State WA Zip Code 98168-0900<br>Purpose of Disbursement Airfare<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Transaction ID: D78715<br>Date of Disbursement<br>04 / 24 / 2006<br>Amount of Each Disbursement this Period<br>777.12<br>[MEMO ITEM] |
|---|--|--|

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 193 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Midwest Airlines</b>  |  | Transaction ID: D78707<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 2 / 2 0 0 6 |
| Mailing Address 6744 S Howell Ave  |  | Amount of Each Disbursement this Period<br>519.51  |
| City State Zip Code<br>Oak Creek WI 53154-1422   | Purpose of Disbursement<br>Airfare   |  |
| Candidate Name   |  | 002<br>Category/Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Delta Airlines</b>  |  | Transaction ID: D78708<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 5 / 2 0 0 6 |
| Mailing Address PO Box 20706   |  | Amount of Each Disbursement this Period<br>1040.75   |
| City State Zip Code<br>Atlanta GA 30320-6001   | Purpose of Disbursement<br>Airfare   |  |
| Candidate Name   |  | 002<br>Category/Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Alaska Air</b>  |  | Transaction ID: D78709<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 7 / 2 0 0 6 |
| Mailing Address PO Box 68900   |  | Amount of Each Disbursement this Period<br>718.61  |
| City State Zip Code<br>Seattle WA 98168-0900   | Purpose of Disbursement<br>Airfare   |  |
| Candidate Name   |  | 002<br>Category/Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM]  |

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 194 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |   |
|--|--|---|
| <p><b>A. ATA</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 7337 W Washington St</p> <p>City Indianapolis State IN Zip Code 46231-1328</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: D78719</b></p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="304.45"/></p> <p><b>[MEMO ITEM]</b></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  |  | <p>Category/Type</p> <p><input type="text" value="002"/></p>  |

|  |  |  |
|--|--|--|
| <p><b>B. Bank Of America</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 60073</p> <p>City City Of Industry State CA Zip Code 91716-0073</p> <p>Purpose of Disbursement See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: D78918</b></p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1641.97"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  |  | <p>Category/Type</p> <p><input type="text" value=""/></p>  |

|   |  |   |
|---|--|---|
| <p><b>C. Midwest Airlines</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 6744 S Howell Ave</p> <p>City Oak Creek State WI Zip Code 53154-1422</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: D78920</b></p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="610.87"/></p> <p><b>[MEMO ITEM]</b></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>   |  | <p>Category/Type</p> <p><input type="text" value="002"/></p>  |

|   |   |
|---|---|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="1641.97"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text" value=""/></p>        |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 195 / 197

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |  |  |             |
|--|--|--|-------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Delta Airlines</b>  |  | Transaction ID: D78921<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 7 / 2 0 0 6 |             |
| Mailing Address PO Box 20706   |  | Amount of Each Disbursement this Period<br>1005.20   |             |
| City Atlanta<br>State GA<br>Zip Code 30320-6001  | Purpose of Disbursement<br>Airfare<br>Candidate Name   | Category/<br>Type<br>002   | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |             |

|  |                  |
|--|------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>0.00</b>      |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>461702.08</b> |

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

|                                     |    |
|-------------------------------------|----|
| <input type="checkbox"/>            | 9  |
| <input checked="" type="checkbox"/> | 10 |

NAME OF COMMITTEE (In Full)  
Forward Together PAC

|  |             |                        |   |
|--|-------------|------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>CitationShares |             |                        | Nature of Debt (Purpose):<br>Air Transportation |
| Mailing Address 5 American Ln  |             |                        |   |
| City<br>Greenwich  | State<br>CT | ZIP Code<br>06831-2551 |   |

|   |                     |   |  |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period |                     | <b>Transaction ID: D78257</b>               |  |
| 19952.00                                  |                     |   |  |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |  |
| 0.00                                      | 19952.00            | 0.00  |  |

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

Form/Schedule: **F3XA**

Transaction ID:

Please be advised that all operating expenditures detailed in Schedule B, Line 21 (b) are generic operating expenditures incurred on behalf of Foward Together PAC. The detailed operating expenditures were not made on behalf of specifically identified federal candidates. Moreover, the expenditures were not for public communications and/or voter drive activity containing express activity.