

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) League of Conservation Voters Action Fund	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00252940
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Typed Letter Corp

Mailing Address  
7601 West University

City State Zip Code  
Wichita KS 67209-

Purpose of Expenditure Category/Type  
bundling mailing

Name of Federal Candidate supported or Opposed by expenditure:  
LINCOLN D CHAFEE

Calendar Year-To-Date Per Election for Office Sought 2021.25

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

Amount  
2021.25

**Transaction ID:** 200015760

Office Sought:  House State: RI  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : G-2006  
2006

Full Name (Last, First, Middle, Initial) of Payee  
Typed Letter Corp

Mailing Address  
7601 West University

City State Zip Code  
Wichita KS 67209-

Purpose of Expenditure Category/Type  
bundling mailing

Name of Federal Candidate supported or Opposed by expenditure:  
ROBERT P CASEY, JR

Calendar Year-To-Date Per Election for Office Sought 2021.25

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

Amount  
2021.25

**Transaction ID:** 200015758

Office Sought:  House State: PA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : G-2006  
2006

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>4042.50</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	
<b>(c) TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins  
Signature

Date M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 9