

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 PAC For a Change

ADDRESS (number and street) 777 S. Figueroa Street, Ste. 4050 Los Angeles CA 90017

2. FEC IDENTIFICATION NUMBER C00342048 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2005 through 12 31 2005

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 Stephen J. Kaufman Asst. Treas

Signature of Treasurer Electronically Filed by Stephen J. Kaufman Asst. Treas Date 04 21 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
PAC For a Change

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		45211.91
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	528946.63									
(c) Total Receipts (from Line 19)	383229.46	1119476.94								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	912176.09	1164688.85								
7. Total Disbursements (from Line 31)	274536.07	527048.83								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	637640.02	637640.02								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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
PAC For a Change

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	129917.42	469708.44
(i) Itemized (use Schedule A)	195007.35	571517.30
(ii) Unitemized	324924.77	1041225.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)	100.00	100.00
(b) Political Party Committees	57250.00	76650.00
(c) Other Political Committees (such as PACs)	382274.77	1117975.74
(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)	235.28	727.78
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	719.41	773.42
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))	383229.46	1119476.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	383229.46	1119476.94

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	189961.07	417473.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	189961.07	417473.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	74500.00	94500.00
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	75.00	5075.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	75.00	5075.00
29. Other Disbursements.....	10000.00	10000.00
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))..	274536.07	527048.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	274536.07	527048.83

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	382274.77	1117975.74
34. Total Contribution Refunds (from Line 28(d))	75.00	5075.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	382199.77	1112900.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	189961.07	417473.83
37. Offsets to Operating Expenditures (from Line 15, page 3)	235.28	727.78
38. Net Operating Expenditures (subtract Line 37 from Line 36)	189725.79	416746.05

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 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Lane B. Adams

Mailing Address 2975 Lexington Road

City State Zip Code
Louisville KY 40206

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2005

Transaction ID: C16835

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Alan Althouse

Mailing Address 3312 E. Harmony Avenue

City State Zip Code
Mesa AZ 85204

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

Name of Employer Occupation
TruWest Credit Union Finance

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

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 23 / 2005

Transaction ID: C20047

Amount of Each Receipt this Period
100.00

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

Mailing Address 3299 Manda Dr.

City State Zip Code
San Jose CA 95124

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

Name of Employer Occupation
Symantec, Inc. Web Producer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.42

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 19 / 2005

Transaction ID: C21590

Amount of Each Receipt this Period
100.42

SUBTOTAL of Receipts This Page (optional)	▶	300.42
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
John W. Backus

Mailing Address 100 Gresham Street

City State Zip Code
Ashland OR 97520

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

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

Transaction ID: C20067

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Dorothea Bamford

Mailing Address 19020 Withley Rd.

City State Zip Code
Monte Sereno CA 95030-4154

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

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

Transaction ID: C18103

Amount of Each Receipt this Period
400.00

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

Mailing Address 19020 Withley Rd.

City State Zip Code
Monte Sereno CA 95030-4154

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

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

Transaction ID: C19829

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)	▶	675.00
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 8 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Byron Barber		Date of Receipt M M / D D / Y Y Y Y 07 / 22 / 2005	
Mailing Address PO Box 1752		Transaction ID: C16745	
City State Zip Code Cathedral City CA 92235		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Byron Barber		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2005	
Mailing Address PO Box 1752		Transaction ID: C17935	
City State Zip Code Cathedral City CA 92235		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Byron Barber		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2005	
Mailing Address PO Box 1752		Transaction ID: C20042	
City State Zip Code Cathedral City CA 92235		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Byron Barber Mailing Address PO Box 1752 City State Zip Code Cathedral City CA 92235 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 5 Transaction ID: C21656 Amount of Each Receipt this Period 100.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00		

B. Full Name (Last, First, Middle Initial) Carol Berman Mailing Address 1007 Valencia Way City State Zip Code Pacifica CA 94044 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5 Transaction ID: C21683 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Visa Business Analyst Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Louis Blau Mailing Address 1475 Bel Air Rd. City State Zip Code Los Angeles CA 90077 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5 Transaction ID: C21561 Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 159
	<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)
PAC For a Change

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

Mailing Address 19 Old Landing Road

City Tiburon State CA Zip Code 94920

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2005

Transaction ID: C16942

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Elaine Booth

Mailing Address 3 Winterbranch

City Irvine State CA Zip Code 92604

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2005

Transaction ID: C17624

Amount of Each Receipt this Period
 50.00

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

Mailing Address 3 Winterbranch

City Irvine State CA Zip Code 92604

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 04 / 2005

Transaction ID: C21425

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Wilmar L. Boschman		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2005
Mailing Address 3801 Panorama Drive		Transaction ID: C17930
City State Zip Code Bakersfield CA 93306	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Semitropic Water Storage District	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Gladys M. Bransford		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2005
Mailing Address P.O. Box 1066		Transaction ID: C17939
City State Zip Code Cobb CA 95426	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Gladys M. Bransford		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2005
Mailing Address P.O. Box 1066		Transaction ID: C17966
City State Zip Code Cobb CA 95426	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
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 12 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Mimi Buckley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 10 Fern Canyon Road		Transaction ID: C19435	
City State Zip Code Mill Valley CA 94941	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Marin Academy	Occupation Board of Trustees		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Emily Campbell		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 5	
Mailing Address 1386 Bay Road		Transaction ID: C16533	
City State Zip Code East Palo Alto CA 94303	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer American Institute for Research	Occupation Database Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) C. Emily Campbell		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 5	
Mailing Address 1386 Bay Road		Transaction ID: C16580	
City State Zip Code East Palo Alto CA 94303	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer American Institute for Research	Occupation Database Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

SUBTOTAL of Receipts This Page (optional) ▶	5200.00
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 13 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Emily Campbell		Date of Receipt M M / D D / Y Y Y Y Y 09 / 07 / 2005
Mailing Address 1386 Bay Road		Transaction ID: C17911
City State Zip Code East Palo Alto CA 94303	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer American Institute for Research Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Database Administrator Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Emily Campbell		Date of Receipt M M / D D / Y Y Y Y Y 10 / 06 / 2005
Mailing Address 1386 Bay Road		Transaction ID: C17960
City State Zip Code East Palo Alto CA 94303	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer American Institute for Research Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Database Administrator Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Emily Campbell		Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2005
Mailing Address 1386 Bay Road		Transaction ID: C18764
City State Zip Code East Palo Alto CA 94303	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer American Institute for Research Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Database Administrator Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Emily Campbell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 1386 Bay Road		Transaction ID: C19452	
City State Zip Code East Palo Alto CA 94303		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer American Institute for Research		Occupation Database Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Emily Campbell		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 1386 Bay Road		Transaction ID: C20927	
City State Zip Code East Palo Alto CA 94303		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer American Institute for Research		Occupation Database Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. James K. Campbell		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address PO Box 127		Transaction ID: C20901	
City State Zip Code Kentfield CA 94914-0127		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed		Occupation Philanthropist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Cindy Cao

Mailing Address 39 Nace Ave

City State Zip Code
Piedmont CA 94611-4325

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

Name of Employer Occupation
Asian American Home Care, Inc Administrator

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

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

Transaction ID: C21567

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Loretta P. Cassidy

Mailing Address 700 13th Street NW, Suite 400

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

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

Transaction ID: C20816

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1410 Wright Avenue

City State Zip Code
Sunnyvale CA 94087

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

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

Transaction ID: C19834

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	3750.00
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 16 / 159
	(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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Kay Gott Chaffey		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 1200 Mira Mar Avenue, Apt. 806		Transaction ID: C18677	
City State Zip Code Medford OR 97504-8554	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Jayni Chase		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 5	
Mailing Address P.O. Box 257		Transaction ID: C17340	
City State Zip Code Bedford NY 10506-0257	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed Occupation Environmentalist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Richard Chogyoji		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 5	
Mailing Address 2517 Hines Drive		Transaction ID: C17672	
City State Zip Code Los Angeles CA 90065-3522	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional) ▶	760.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Richard Chogyoji		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 2517 Hines Drive		Transaction ID: C21076	
City State Zip Code Los Angeles CA 90065-3522		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Louise Harvey Clark		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 8 / 2 0 0 5	
Mailing Address 6 Blackthorn Rd.		Transaction ID: C17212	
City State Zip Code Lafayette CA 94549-3307		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Louise Harvey Clark		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 6 Blackthorn Rd.		Transaction ID: C18196	
City State Zip Code Lafayette CA 94549-3307		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
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 18 / 159
	(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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Cynthia Cohen Mailing Address 1126 1/2 Delaware Street City Berkeley State CA Zip Code 94707 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2005 Transaction ID: C16388 Amount of Each Receipt this Period 250.00
Name of Employer Luninx, Inc. Occupation Energy Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) James M. Copeland, Jr. Mailing Address 4287 Embassy Park Drive NW City Washington State DC Zip Code 20016 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2005 Transaction ID: C20813 Amount of Each Receipt this Period 500.00
Name of Employer Copeland, Lowery, Jacquez, Denton. Occupation Accountant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C. Full Name (Last, First, Middle Initial) Julia Craig Mailing Address 2337 Parker Street, Apt. 7 City Berkeley State CA Zip Code 94704-2841 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2005 Transaction ID: C16853 Amount of Each Receipt this Period 25.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

SUBTOTAL of Receipts This Page (optional)	775.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Julia Craig		Date of Receipt M M / D D / Y Y Y Y Y 08 / 16 / 2005	
Mailing Address 2337 Parker Street, Apt. 7		Transaction ID: C17667	
City State Zip Code Berkeley CA 94704-2841	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

Full Name (Last, First, Middle Initial) B. Julia Craig		Date of Receipt M M / D D / Y Y Y Y Y 12 / 04 / 2005	
Mailing Address 2337 Parker Street, Apt. 7		Transaction ID: C21424	
City State Zip Code Berkeley CA 94704-2841	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

Full Name (Last, First, Middle Initial) C. James A. Crettol		Date of Receipt M M / D D / Y Y Y Y Y 09 / 19 / 2005	
Mailing Address 29550 Merced Avenue		Transaction ID: C17925	
City State Zip Code Shafter CA 93263	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Crettol Farms	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	535.00
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 20 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Lew Cunningham		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 3886 La Jolla Village Drive		Transaction ID: C18251	
City State Zip Code La Jolla CA 92037		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Donna Curling		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 11200 Bowen Road		Transaction ID: C20809	
City State Zip Code Roswell GA 30075-2239		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Teddi Curtis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 1027 Oakdale Street		Transaction ID: C20119	
City State Zip Code Corona CA 92880-1251		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	5300.00
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 21 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Jana Cytrynbaum		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 15772 E. Progress Drive		Transaction ID: C18339
City State Zip Code Centennial CO 80015	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Stephen Davis		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 1302 Moreau Drive		Transaction ID: C21592
City State Zip Code Jefferson City MO 65101	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Pacing Trends, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Darlene De Palma		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 5
Mailing Address 8504 Forest Parkway		Transaction ID: C19957
City State Zip Code Woodhaven NY 11421	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Danny Devito

Mailing Address P.O. Box 491246

City State Zip Code
Los Angeles CA 90049

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

Name of Employer Self Employed Occupation
Self Employed Actor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2005

Transaction ID: C16581

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Susan H Dietz

Mailing Address 3905 Ventura Canyon Ave.

City State Zip Code
Sherman Oaks CA 91423-4712

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

Name of Employer Canyon Theatricals Occupation
Canyon Theatricals Producer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2005

Transaction ID: C16874

Amount of Each Receipt this Period
1000.00

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

Mailing Address 619 Park Avenue

City State Zip Code
Arcata CA 95521

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

Name of Employer Self Employed Occupation
Self Employed Real Estate Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 26 / 2005

Transaction ID: C20078

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	6100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Bette Dobkin		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 619 Park Avenue		Transaction ID: C21389	
City Arcata	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 95521			
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Real Estate Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Aileen S. Dolby		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 5	
Mailing Address 6000 Acacia Avenue		Transaction ID: C16386	
City Oakland	State CA	Amount of Each Receipt this Period 250.00	
Zip Code 94618			
FEC ID number of contributing federal political committee. C			
Name of Employer Colliers International	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Thomas J. Downey		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 5	
Mailing Address 1225 I Street NW, Suite 600		Transaction ID: C16563	
City Washington	State DC	Amount of Each Receipt this Period 1000.00	
Zip Code 20005-3914			
FEC ID number of contributing federal political committee. C			
Name of Employer Downey McGrath Group, Inc.	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
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 24 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Thomas J. Downey		Date of Receipt MM / DD / YYYY 11 / 21 / 2005
Mailing Address 1225 I Street NW, Suite 600		Transaction ID: C20824
City Washington	State DC	Zip Code 20005-3914
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Downey McGrath Group, Inc.	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Bob Dreizler		Date of Receipt MM / DD / YYYY 08 / 25 / 2005
Mailing Address 1125 35th Street		Transaction ID: C17739
City Sacramento	State CA	Zip Code 95816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Susan Duncan		Date of Receipt MM / DD / YYYY 10 / 26 / 2005
Mailing Address 1475 Mountain Blvd.		Transaction ID: C19058
City Oakland	State CA	Zip Code 94611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1350.00
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 25 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Kirven Dunham		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2005
Mailing Address 11150 Trinity River Dr #61		Transaction ID: C16894
City State Zip Code Rancho Cordova CA 95670	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer DST Innovis	Occupation Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Jill Dyche		Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2005
Mailing Address 3775 Ballina Canyon Road		Transaction ID: C21047
City State Zip Code Encino CA 91436-4111	Amount of Each Receipt this Period 199.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.00	

Full Name (Last, First, Middle Initial) C. Lynne Eggers		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2005
Mailing Address 221 Mullen Ave.		Transaction ID: C20004
City State Zip Code San Francisco CA 94110	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional) ▶	299.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Lynne Eggers		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 221 Mullen Ave.		Transaction ID: C21363
City State Zip Code San Francisco CA 94110	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Full Name (Last, First, Middle Initial) B. Robert A. Emerson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 3016 Bateman Street		Transaction ID: C19197
City State Zip Code Berkeley CA 94705	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer UC Berkeley	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Philip Encinio		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 1808 Catalina Avenue		Transaction ID: C16634
City State Zip Code Berkeley CA 94707	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional) ▶	560.00
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 27 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Philip Encinio		Date of Receipt M M / D D / Y Y Y Y Y 08 / 15 / 2005	
Mailing Address 1808 Catalina Avenue		Transaction ID: C16902	
City State Zip Code Berkeley CA 94707	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

Full Name (Last, First, Middle Initial) B. Philip Encinio		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2005	
Mailing Address 1808 Catalina Avenue		Transaction ID: C20111	
City State Zip Code Berkeley CA 94707	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

Full Name (Last, First, Middle Initial) C. Robert S. Epstein		Date of Receipt M M / D D / Y Y Y Y Y 12 / 01 / 2005	
Mailing Address 618 Santa Barbara Road		Transaction ID: C20900	
City State Zip Code Berkeley CA 94707	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1050.00
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 28 / 159						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Victor Estaba		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2005	
Mailing Address 108 king charles road		Transaction ID: C16749	
City State Zip Code Columbia SC 29209	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

Full Name (Last, First, Middle Initial) B. Victor Estaba		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2005	
Mailing Address 108 king charles road		Transaction ID: C16897	
City State Zip Code Columbia SC 29209	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

Full Name (Last, First, Middle Initial) C. Victor Estaba		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2005	
Mailing Address 108 king charles road		Transaction ID: C16900	
City State Zip Code Columbia SC 29209	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

SUBTOTAL of Receipts This Page (optional) ▶	75.00
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 29 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Victor Estaba		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 108 king charles road		Transaction ID: C20074	
City State Zip Code Columbia SC 29209		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00	

Full Name (Last, First, Middle Initial) B. Victor Estaba		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 108 king charles road		Transaction ID: C21081	
City State Zip Code Columbia SC 29209		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00	

Full Name (Last, First, Middle Initial) C. Victor Estaba		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 108 king charles road		Transaction ID: C21082	
City State Zip Code Columbia SC 29209		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00	

SUBTOTAL of Receipts This Page (optional) ▶	75.00
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: <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 type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 30 / 159
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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Victor Estaba		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 108 king charles road		Transaction ID: C21605	
City State Zip Code Columbia SC 29209		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00	

Full Name (Last, First, Middle Initial) B. John Farritor		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5	
Mailing Address 312 Horizon Lane		Transaction ID: C17248	
City State Zip Code Oceanside CA 92056		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 435.00	

Full Name (Last, First, Middle Initial) C. John Farritor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 312 Horizon Lane		Transaction ID: C18700	
City State Zip Code Oceanside CA 92056		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 435.00	

SUBTOTAL of Receipts This Page (optional) ▶	110.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Marjorie Fasman Mailing Address 701 N Rexford Drive City State Zip Code Beverly Hills CA 90210-3313 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: C19143 Amount of Each Receipt this Period 100.00
Name of Employer Self Employed Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Thomas Fortune Fay Mailing Address 2043 Merrifields Drive City State Zip Code Silver Spring MD 20906 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 5 Transaction ID: C21020 Amount of Each Receipt this Period 250.00
Name of Employer Thomas Fortune Fay, PC Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Danah H. Fayman Mailing Address 700 Front Street, #1103 City State Zip Code San Diego CA 92101 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5 Transaction ID: C19256 Amount of Each Receipt this Period 500.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Victor H. Fazio		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 1333 New Hampshire Avenue, NW		Transaction ID: C20827
City State Zip Code Washington DC 20036-1511	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Akin Gump	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Francis Flannery, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 2 / 2 0 0 5
Mailing Address 7 Jones Drive		Transaction ID: C17913
City State Zip Code Sayville NY 11782-2908	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Francis Flannery, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 7 Jones Drive		Transaction ID: C18788
City State Zip Code Sayville NY 11782-2908	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	2570.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Fredrick Ford		Date of Receipt M M / D D / Y Y Y Y Y 08 / 16 / 2005	
Mailing Address 1655 Geary Road		Transaction ID: C17650	
City State Zip Code Walnut Creek CA 94597-2519	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Fredrick Ford		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2005	
Mailing Address 1655 Geary Road		Transaction ID: C20118	
City State Zip Code Walnut Creek CA 94597-2519	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Trygve Forland		Date of Receipt M M / D D / Y Y Y Y Y 10 / 21 / 2005	
Mailing Address 1332 Woodland Dr.		Transaction ID: C18337	
City State Zip Code Santa Paula CA 93060	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	200.00
TOTAL 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 34 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Samuel French		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2005	
Mailing Address 17 Via San Remo		Transaction ID: C17967	
City State Zip Code Rancho Palos Verde CA 90275		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Harbor UCLA Medical Center Occupation Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. James Geers		Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2005	
Mailing Address 12742 Leander Drive		Transaction ID: C20551	
City State Zip Code Los Altos Hills CA 94022-3382		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Rosalie Goldberg		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2005	
Mailing Address 110 East End Ave. 7D		Transaction ID: C16936	
City State Zip Code New York NY 10028		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Elizabeth Goldsmith- Zaillian		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 5	
Mailing Address 695 Latimer Road		Transaction ID: C21859	
City State Zip Code Santa Monica CA 90402-1013		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Marc Gollub		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 44 West 62nd Street, Apt. 26A		Transaction ID: C18847	
City State Zip Code New York NY 10023		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Memorial Hospital Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	

C. Full Name (Last, First, Middle Initial) Sally Goodwin		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 3677 Woodland Hall Lane		Transaction ID: C21453	
City State Zip Code Clinton WA 98236-9823		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Employed Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
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 36 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Marianne E. Graham		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2005	
Mailing Address 3053 Hillegass Avenue		Transaction ID: C16389	
City State Zip Code Berkeley CA 94705	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Naomi Greenberg		Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2005	
Mailing Address 3408 Washington Avenue		Transaction ID: C20159	
City State Zip Code Baltimore MD 21244	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Naomi Greenberg		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2005	
Mailing Address 3408 Washington Avenue		Transaction ID: C21391	
City State Zip Code Baltimore MD 21244	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Naomi Greenberg

Mailing Address 3408 Washington Avenue

City State Zip Code
Baltimore MD 21244

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 21 / 2005

Transaction ID: C21630

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Sheryl Greenberg

Mailing Address 2802 N. Placita Rancho Agave

City State Zip Code
Tucson AZ 85715

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

Name of Employer Self Employed Occupation Realtor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2005

Transaction ID: C17687

Amount of Each Receipt this Period
250.00

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

Mailing Address 2661 Cedar Street

City State Zip Code
Berkeley CA 94708-1933

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

Name of Employer Self Employed Occupation Art Gallery Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
12 / 02 / 2005

Transaction ID: C21414

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	400.00
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 38 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Larry Hagman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 9950 Sulphur Mountain Road		Transaction ID: C18292
City State Zip Code Ojai CA 93023	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Majlar Productions	Occupation Actor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Edison Han		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5
Mailing Address 8183 Pepper Circle		Transaction ID: C17229
City State Zip Code Buena Park CA 90620	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Dentist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. J. Joseph Hardy		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 2301 N. Albemarle Street		Transaction ID: C20811
City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Strategic Marketing Innovation Inc	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 159		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Henry F. Harrison		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2005	
Mailing Address 18 Winter Street		Transaction ID: C17696	
City State Zip Code Lincoln MA 01773		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed Occupation Social Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Donald Hawkins		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2005	
Mailing Address 78020 Ravencrest Circle		Transaction ID: C17968	
City State Zip Code Palm Desert CA 92211		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. John B. Henry		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2005	
Mailing Address 54 Riverside Drive #16B		Transaction ID: C13528	
City State Zip Code New York NY 10024-6553		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed Occupation Writer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Debbie Hicks		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2005
Mailing Address 3797 N. Camino de Oeste		Transaction ID: C17231
City State Zip Code Tucson AZ 85745	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Saltwater Inc.	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Debbie Hicks		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2005
Mailing Address 3797 N. Camino de Oeste		Transaction ID: C17936
City State Zip Code Tucson AZ 85745	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Saltwater Inc.	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Debbie Hicks		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2005
Mailing Address 3797 N. Camino de Oeste		Transaction ID: C20229
City State Zip Code Tucson AZ 85745	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Saltwater Inc.	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 159		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Debbie Hicks		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 3797 N. Camino de Oeste		Transaction ID: C21361	
City State Zip Code Tucson AZ 85745	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Saltwater Inc.	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. John Harry Hill, Ph.D		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 5	
Mailing Address 11377 SW 84th Street., Apt. 212		Transaction ID: C16959	
City State Zip Code Miami FL 33173-3644	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00		

Full Name (Last, First, Middle Initial) C. John Harry Hill, Ph.D		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 11377 SW 84th Street., Apt. 212		Transaction ID: C20662	
City State Zip Code Miami FL 33173-3644	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
John Harry Hill, Ph.D

Mailing Address 11377 SW 84th Street., Apt. 212

City <u>Miami</u>	State <u>FL</u>	Zip Code <u>33173-3644</u>
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Transaction ID: C21372

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Eileen Hilliker

Mailing Address 25401 Via Piedra Blanca

City <u>Laguna Niguel</u>	State <u>CA</u>	Zip Code <u>92677-1818</u>
------------------------------	--------------------	-------------------------------

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

Name of Employer Paul Hilliker & Associates	Occupation Appraisal Assistant
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	5

Transaction ID: C20738

Amount of Each Receipt this Period
300.00

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

Mailing Address 339 Hillcrest Drive

City <u>Encinitas</u>	State <u>CA</u>	Zip Code <u>92024</u>
--------------------------	--------------------	--------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	8	/	2	0	0	5

Transaction ID: C16838

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. David Hodges		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 339 Hillcrest Drive		Transaction ID: C18868	
City State Zip Code Encinitas CA 92024	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 950.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. David Hodges		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5	
Mailing Address 339 Hillcrest Drive		Transaction ID: C21648	
City State Zip Code Encinitas CA 92024	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 950.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Terry S. Horowit		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5	
Mailing Address 14007 Arctic Avenue		Transaction ID: C16796	
City State Zip Code Rockville MD 20853	Amount of Each Receipt this Period 54.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Har Shalom Congregation Potomac MD Occupation Cantor	Aggregate Year-to-Date ▼ 306.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	404.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Terry S. Horowitz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 14007 Arctic Avenue		Transaction ID: C20236
City State Zip Code Rockville MD 20853	Amount of Each Receipt this Period 54.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Har Shalom Congregation Potomac MD	Occupation Cantor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00	

Full Name (Last, First, Middle Initial) B. Zachary I. Horowitz		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 316 Conway Avenue		Transaction ID: C20965
City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Universal Music Group	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Rudolph Hurwich		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Mailing Address 2608 9th Street		Transaction ID: C21043
City State Zip Code Berkeley CA 94710-2550	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Management Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1554.00
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 45 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Tania Idle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 9100 Wilshire Blvd. 1000 West		Transaction ID: C20610 Amount of Each Receipt this Period 500.00
City State Zip Code Beverly Hills CA 90212-3415	FEC ID number of contributing federal political committee. C	
Name of Employer Homemaker	Occupation Homemaker	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Oscar J. Jackson		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5
Mailing Address 93 Monterey Blvd.		Transaction ID: C19991 Amount of Each Receipt this Period 250.00
City State Zip Code San Francisco CA 94131-3261	FEC ID number of contributing federal political committee. C	
Name of Employer Self Employed	Occupation Physician	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Lynette R. Jacquez		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 2403 Lellah Court		Transaction ID: C20814 Amount of Each Receipt this Period 2500.00
City State Zip Code Dunn Loring VA 22027	FEC ID number of contributing federal political committee. C	
Name of Employer Copeland Lowery Jacquez et al	Occupation Accountant	Amount of Each Receipt this Period 2500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	3250.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Joel P. Johnson		Date of Receipt MM / DD / YYYY 12 / 05 / 2005
Mailing Address 6012 Euclid Street		Transaction ID: C20928
City Cheverly	State MD	Zip Code 20785-3022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Grover Park Group	Occupation Managing Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Pamela Ann Johnson		Date of Receipt MM / DD / YYYY 09 / 19 / 2005
Mailing Address 114 Madison Place		Transaction ID: C17924
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Virginia Johnson		Date of Receipt MM / DD / YYYY 08 / 16 / 2005
Mailing Address 10804 Flaxton Street		Transaction ID: C17649
City Culver City	State CA	Zip Code 90230
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	2050.00
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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 47 / 159
	(check only one)	
	<input checked="" 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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Henry A. Jordan, MD Mailing Address 1465 Horseshoe Trail City State Zip Code Chester Springs PA 19425 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>0</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: C18678 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	4	/	2	0	0	5	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	2	4	/	2	0	0	5														
1000.00																							
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																					
1000.00																							

B. Full Name (Last, First, Middle Initial) Peter G Joseph Mailing Address 53 Summit Road City State Zip Code San Anselmo CA 94960-2240 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: C21095 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	4	/	2	0	0	5														
100.00																							
Name of Employer Self Employed Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1100.00</td> </tr> </table>		1100.00																					
1100.00																							

C. Full Name (Last, First, Middle Initial) Pete Kameron Mailing Address 2918 Deep Canyon Dr. City State Zip Code Beverly Hills CA 90210-1010 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>0</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: C20633 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	7	/	2	0	0	5	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	2	7	/	2	0	0	5														
250.00																							
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00																					
250.00																							

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td>1350.00</td> </tr> </table>	1350.00
1350.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Marvin L.M. Kay		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 0 5
Mailing Address 98 Kendal Drive		Transaction ID: C17703
City Oberlin	State OH	Zip Code 44074
Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Marvin L.M. Kay		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 5
Mailing Address 98 Kendal Drive		Transaction ID: C17962
City Oberlin	State OH	Zip Code 44074
Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Nancy Kaye		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 5
Mailing Address 4540 Encino Avenue		Transaction ID: C17403
City Encino	State CA	Zip Code 91316
Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Kayo Sportswear	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Samuel A. Keesal, Jr.		Date of Receipt MM / DD / YYYY 11 / 21 / 2005
Mailing Address 400 Oceangate, 14th Floor		Transaction ID: C19995
City Long Beach	State CA	Zip Code 90802
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer Keesal, Young, & Olson	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Keenan Colton Kelsey		Date of Receipt MM / DD / YYYY 08 / 19 / 2005
Mailing Address 101 Hawthorne Avenue		Transaction ID: C16606
City Larkspur	State CA	Zip Code 94939
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Noe Valley Ministry	Occupation Pastor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Bruce Kennedy		Date of Receipt MM / DD / YYYY 10 / 24 / 2005
Mailing Address 16430 Ambaum Blvd S		Transaction ID: C20314
City Seattle	State WA	Zip Code 98148-1444
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
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 50 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Dion Kennedy		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 31305 Paseo Del Sol		Transaction ID: C21477
City State Zip Code Laguna Niguel CA 92677-2746	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Laguna Travel Service Travel Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Constance Kheel		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 1 Joslin Lane		Transaction ID: C20125
City State Zip Code Buskirk NY 12028-3511	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Employed Artist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ellie Kierson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 1018 E. Talbot Street		Transaction ID: C20417
City State Zip Code Arlington Heights IL 60004-5073	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Worldworks Consulting Mgmt Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	950.00
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 51 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Linda Kramer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 15 Mark Terrace		Transaction ID: C18793	
City State Zip Code Tiburon CA 94920		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation H J Kramer Publisher			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Susan Kritzik		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 1 / 2 0 0 5	
Mailing Address 15 Possum Lane		Transaction ID: C17964	
City State Zip Code Portola Valley CA 94028		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Mark Sontag, M.D. Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Frances Lang Labaree		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 1 / 2 0 0 5	
Mailing Address 85 Kenwood Street		Transaction ID: C18002	
City State Zip Code Brookline MA 02246		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation The Brookline Center Social Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Conrad Larkin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address City State Zip Code Santa Rosa CA 95407		Transaction ID: C20480
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 225.00	

B. Full Name (Last, First, Middle Initial) Conrad Larkin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 5
Mailing Address City State Zip Code Santa Rosa CA 95407		Transaction ID: C21088
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 225.00	

C. Full Name (Last, First, Middle Initial) Conrad Larkin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 5
Mailing Address City State Zip Code Santa Rosa CA 95407		Transaction ID: C21093
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Maribelle Leavitt		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5	
Mailing Address 3450 Sacramento Street		Transaction ID: C21270	
City State Zip Code San Francisco CA 94118-1914		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Robert Leonard		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 379 Green Mountain Rd		Transaction ID: C21173	
City State Zip Code Mahwah NJ 07430-2725		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation The Judge Group IT Auditor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Maryon D Lewis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 2900 Broadway St.		Transaction ID: C18342	
City State Zip Code San Francisco CA 94115-1062		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Thomas Lewis		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2005	
Mailing Address POB 60976		Transaction ID: C16893	
City Palo Alto	State CA	Zip Code 94306	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		

B. Full Name (Last, First, Middle Initial) Stephanie Low		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2005	
Mailing Address 1215 Fifth Ave		Transaction ID: C17128	
City New York	State NY	Zip Code 10029	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Arts Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

C. Full Name (Last, First, Middle Initial) Theodore D. Lynch		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2005	
Mailing Address 10507 Clipper Drive		Transaction ID: C20808	
City Fairfax Station	State VA	Zip Code 22039-1909	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Strategic Marketing Innovation	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional) ▶	3075.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Fiona Ma Mailing Address 2562- 36th Avenue City San Francisco State CA Zip Code 94116-2818 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5 Transaction ID: C20897 Amount of Each Receipt this Period 500.00
Name of Employer San Francisco Board of Supervisors Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Supervisor Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Charmayne Macon Mailing Address 5459 Mittendork Lane City Alexandria State VA Zip Code 22315 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5 Transaction ID: C21006 Amount of Each Receipt this Period 500.00
Name of Employer The Ferguson Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Consultant Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Arturo Maimoni Mailing Address 134 Crestview Drive City Orinda State CA Zip Code 94563 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 9 / 2 0 0 5 Transaction ID: C16846 Amount of Each Receipt this Period 100.00
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Arturo Maimoni		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 5	
Mailing Address 134 Crestview Drive		Transaction ID: C19657	
City State Zip Code Orinda CA 94563		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Eve M. Maldonado		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 6406 31st Street NW		Transaction ID: C21055	
City State Zip Code Washington DC 20015-2342		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation MARC Associates, Inc. Senior Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Susan Mann		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 5	
Mailing Address 1029 Hacienda Ave.		Transaction ID: C17735	
City State Zip Code Davis CA 95616		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation UC Davis Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Arlene Martin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 49 West. 12th Street, Apt. 2F		Transaction ID: C21084	
City State Zip Code New York NY 10011	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Kirk W McAllister		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 5315 Verde Avenue		Transaction ID: C18849	
City State Zip Code Hilmar CA 95324	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer McAllister & McAllister, Inc.	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Sandra McCandless		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 735 Tanglewood Lane		Transaction ID: C20898	
City State Zip Code Lafayette CA 94549	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer eDicta.org	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Hollis McMillan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 331 Dunemere Drive		Transaction ID: C20157
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Occupation Psychologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

B. Full Name (Last, First, Middle Initial) Ernest Mehler		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 175 West 93rd Street, 4h		Transaction ID: C17459
City State Zip Code New York NY 10025-9313	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Weill Medical College Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Ernest Mehler		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 5
Mailing Address 175 West 93rd Street, 4h		Transaction ID: C19943
City State Zip Code New York NY 10025-9313	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Weill Medical College Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	2800.00
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 59 / 159
	(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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Diane I. Meyer Simon		Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2005	
Mailing Address 1570 East Mountain Drive		Transaction ID: C16953	
City State Zip Code Montecito CA 93108		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Global Green USA Founder			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

B. Full Name (Last, First, Middle Initial) George Michael Miller		Date of Receipt M M / D D / Y Y Y Y Y 12 / 12 / 2005	
Mailing Address 205 First Street		Transaction ID: C20964	
City State Zip Code Napa CA 94559		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation The Ferguson Group, LLC Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Lucy Miller		Date of Receipt M M / D D / Y Y Y Y Y 07 / 28 / 2005	
Mailing Address 2506 Kanio St.		Transaction ID: C17131	
City State Zip Code Lihue HI 96766-8805		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Employed Psychologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	3100.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Lucy Miller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 2506 Kanio St.		Transaction ID: C20176
City State Zip Code Lihue HI 96766-8805	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Self Employed	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Lucy Miller		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 2506 Kanio St.		Transaction ID: C21369
City State Zip Code Lihue HI 96766-8805	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Self Employed	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Morongo Band Of Mission Indians		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 5
Mailing Address P.O. Box 366		Transaction ID: C16565
City State Zip Code Cabazon CA 92230-3080	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Sovereign Sovereign	Occupation Nation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Morongo Band Of Mission Indians		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address P.O. Box 366		Transaction ID: C21021	
City State Zip Code Cabazon CA 92230-3080		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Sovereign Occupation Nation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Lynn Morris		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 5	
Mailing Address P.O. Box 1455		Transaction ID: C17831	
City State Zip Code Block Island RI 02807-1455		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Alexandra Moses		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 15 Linden Street		Transaction ID: C21556	
City State Zip Code Wellesley MA 02482		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Moses & Associates Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2250.00
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 62 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Kathleen Moskal		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2005	
Mailing Address 295 Central Park West Apt 17B		Transaction ID: C17095	
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Entrepreneur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Zachary Niemann		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2005	
Mailing Address 5021 Davenport Street		Transaction ID: C17625	
City State Zip Code Omaha NE 68132-2927	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Training Experts, Inc.	Occupation CEO/President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Kevin O'Neill		Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2005	
Mailing Address 8299 Bryn Glen Way		Transaction ID: C20527	
City State Zip Code San Diego CA 92129-4470	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Asbjorn Osland		Date of Receipt MM / DD / YYYY 12 / 01 / 2005
Mailing Address 41 South 16th Street		Transaction ID: C21381
City San Jose	State CA	Zip Code 95112
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer San Jose State University	Occupation College professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ted R. Page		Date of Receipt MM / DD / YYYY 09 / 19 / 2005
Mailing Address 43100 Highway 58		Transaction ID: C17927
City Buttonwillow	State CA	Zip Code 93206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Farmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Georgene K. Pasarell		Date of Receipt MM / DD / YYYY 11 / 09 / 2005
Mailing Address P.O. Box 11908		Transaction ID: C19803
City San Juan	State PR	Zip Code 00922-1908
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
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 64 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. James Pecora		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 9439 Friendly Woods Lane		Transaction ID: C19141	
City State Zip Code Whittier CA 90605	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Rhea Perlman		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 5	
Mailing Address P.O. Box 491246		Transaction ID: C16582	
City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Actor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Philip Portwood		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 5	
Mailing Address 17076 Griffith Avenue		Transaction ID: C17926	
City State Zip Code Wasco CA 93280	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Portwood Farms	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	5600.00
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: <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 type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 65 / 159
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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Marie Raphael		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 5	
Mailing Address PO Box 979		Transaction ID: C19875	
City State Zip Code Redway CA 95560		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Humboldt State University	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) B. Vincent P. Reusing		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 114 Madison Place		Transaction ID: C20810	
City State Zip Code Alexandria VA 22314-1760		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer VPR Associates	Occupation Principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Justine Roberts		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 5	
Mailing Address 152 Sycamore Ave.		Transaction ID: C19835	
City State Zip Code Mill Valley CA 94941-2808		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Kris Rose		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2005
Mailing Address 5425 E. Broadway PMB #226		Transaction ID: C16676
City Tucson State AZ Zip Code 85711	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Dept. of Veterans Affairs	Occupation Medical Technologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Joseph L. Rosso		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2005
Mailing Address 1620 L Street NW, Suite 1210		Transaction ID: C17929
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer VPR Associates LLC	Occupation Accountant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Amy Roth		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2005
Mailing Address 618 Santa Barbara Road		Transaction ID: C20899
City Berkeley State CA Zip Code 94707	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Berkeley Public Ed. Foundation	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2300.00
TOTAL 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 67 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Bonnie Rukin- Miller		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2005	
Mailing Address 48 Evergreen Lane		Transaction ID: C16603	
City State Zip Code Camden ME 04843	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Karen Russo		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2005	
Mailing Address 700 13th Street NW, Ste. 400		Transaction ID: C20812	
City State Zip Code Washington DC 20005-6621	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. Eric Sapirstein		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2005	
Mailing Address 1747 Pennsylvania Ave NW, Apt. MW		Transaction ID: C21845	
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer ENS Resources	Occupation Legislative Advocate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Stephen Schlachter		Date of Receipt MM / DD / YYYY 08 / 21 / 2005
Mailing Address 502 S. 6th Street		Transaction ID: C17880
City Pflugerville	State TX	Zip Code 78660
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Ciber, Inc.	Occupation IT Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Thelma L. Schmidhauser		Date of Receipt MM / DD / YYYY 07 / 07 / 2005
Mailing Address 726 Arbol Verde Street		Transaction ID: C13532
City Carpinteria	State CA	Zip Code 93013
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Thelma L. Schmidhauser		Date of Receipt MM / DD / YYYY 08 / 09 / 2005
Mailing Address 726 Arbol Verde Street		Transaction ID: C16577
City Carpinteria	State CA	Zip Code 93013
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Thelma L. Schmidhauser		Date of Receipt M M / D D / Y Y Y Y Y 09 / 12 / 2005	
Mailing Address 726 Arbol Verde Street		Transaction ID: C17912	
City State Zip Code Carpinteria CA 93013	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Thelma L. Schmidhauser		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2005	
Mailing Address 726 Arbol Verde Street		Transaction ID: C19383	
City State Zip Code Carpinteria CA 93013	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Phil Schoggen		Date of Receipt M M / D D / Y Y Y Y Y 07 / 13 / 2005	
Mailing Address 121 Vossland Drive		Transaction ID: C16626	
City State Zip Code Nashville TN 37205	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Phil Schoggen Mailing Address 121 Vossland Drive City Nashville State TN Zip Code 37205 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2005 Transaction ID: C16761 Amount of Each Receipt this Period 50.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

B. Full Name (Last, First, Middle Initial) David Schonbrunn Mailing Address 775 E. Blithedale Avenue, #570 City Mill Valley State CA Zip Code 94941 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2005 Transaction ID: C21062 Amount of Each Receipt this Period 250.00
Name of Employer Self Employed Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial) Melinda B. Scrivner Mailing Address 17 Cognewaugh Road City Cos Cob State CT Zip Code 06807 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 12 / 2005 Transaction ID: C13549 Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed Occupation Coach Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Kinsey Service		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2005	
Mailing Address 861 Vereda del Ciervo		Transaction ID: C17037	
City State Zip Code Goleta CA 93117-5333	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Bodymind Therapist Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) B. Kinsey Service		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2005	
Mailing Address 861 Vereda del Ciervo		Transaction ID: C17651	
City State Zip Code Goleta CA 93117-5333	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Bodymind Therapist Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. Kinsey Service		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2005	
Mailing Address 861 Vereda del Ciervo		Transaction ID: C20221	
City State Zip Code Goleta CA 93117-5333	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Bodymind Therapist Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Kinsey Service		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 0 5	
Mailing Address 861 Vereda del Ciervo		Transaction ID: C21420	
City State Zip Code Goleta CA 93117-5333		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Employed Bodymind Therapist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. N'az Shami		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 3367 Brookwater Circle		Transaction ID: C21593	
City State Zip Code Orlando FL 32822		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Auto Express Administrator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Kenneth Shaw		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 72962 Bel Air Rd.		Transaction ID: C19296	
City State Zip Code Palm Desert CA 92260-6025		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 295.00	

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Barbara Sher Mailing Address 123 W. 93 St 5G City New York State NY Zip Code 10025 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2005 Transaction ID: C17063 Amount of Each Receipt this Period 250.00
Name of Employer Self Employed Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Cary H. Sherman Mailing Address 9125 Vendome Drive City Bethesda State MD Zip Code 20817-4022 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2005 Transaction ID: C20929 Amount of Each Receipt this Period 1000.00
Name of Employer Record. Industry Assoc. of America Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Leonard S. Simon Mailing Address 1660 L Street NW, Suite 1050 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2005 Transaction ID: C20825 Amount of Each Receipt this Period 250.00
Name of Employer Simon & Company Inc. Occupation Intergovernmental Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Eleanor M. Smeal		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 900 N. Stafford Street, Apt. 2230		Transaction ID: C20806	
City Arlington	State VA	Zip Code 22203	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Feminist Majority	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Patrick Smith		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 5	
Mailing Address 5502 Nanday Court		Transaction ID: C21213	
City Oceanside	State CA	Zip Code 92057	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Genentech	Occupation Sr. Manager Validation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. Andrea J. Snow		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 5	
Mailing Address 243 Bonview Street		Transaction ID: C17915	
City San Francisco	State CA	Zip Code 94110-5501	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer West Contra Costa USD	Occupation Speech Pathologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	3900.00
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 75 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Margaret Spencer		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2005	
Mailing Address 224 E. Fern Avenue		Transaction ID: C17743	
City State Zip Code Redlands CA 92373-6008	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) B. Robert D. Spencer		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2005	
Mailing Address 1135 Clarendon Crescent		Transaction ID: C18418	
City State Zip Code Oakland CA 94610-1807	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Muni Financial	Occupation Economist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Julie Steckel		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2005	
Mailing Address 1126 Bel Air Drive		Transaction ID: C17977	
City State Zip Code Santa Barbara CA 93105-4642	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Clinical Social Work		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Julie Steckel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1126 Bel Air Drive		Transaction ID: C20166
City State Zip Code Santa Barbara CA 93105-4642	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Occupation Self Employed Clinical Social Work		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Julie Steckel		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 1126 Bel Air Drive		Transaction ID: C21365
City State Zip Code Santa Barbara CA 93105-4642	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Occupation Self Employed Clinical Social Work		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. George Stefanik		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 2896 Penman		Transaction ID: C18766
City State Zip Code Tustin CA 92782	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	250.00
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 77 / 159
	(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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Lucy Steinberg		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2005	
Mailing Address P.O. Box 10249		Transaction ID: C16583	
City Newport Beach	State CA	Zip Code 92658	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Community Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

B. Full Name (Last, First, Middle Initial) Martin Stevenson		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2005	
Mailing Address 845 Norma Way		Transaction ID: C16908	
City Santa Barbara	State CA	Zip Code 93111	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

C. Full Name (Last, First, Middle Initial) Carolyn Summers		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2005	
Mailing Address 63 Ferndale Drive		Transaction ID: C16857	
City Hastings-on-Hudson	State NY	Zip Code 10706	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Environmental Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	2800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Carolyn Summers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5
Mailing Address 63 Ferndale Drive		Transaction ID: C21154
City State Zip Code Hastings-on-Hudson NY 10706	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Self Employed	Occupation Environmental Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B. Full Name (Last, First, Middle Initial) Carolyn Summers		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 63 Ferndale Drive		Transaction ID: C21621
City State Zip Code Hastings-on-Hudson NY 10706	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed Self Employed	Occupation Environmental Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C. Full Name (Last, First, Middle Initial) Roselyne C. Swig		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 3710 Washington Street		Transaction ID: C20968
City State Zip Code San Francisco CA 94118-1835	Amount of Each Receipt this Period 4200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer US State Department	Occupation Embassy Art Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00	

SUBTOTAL of Receipts This Page (optional) ▶	4350.00
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 / 159
	(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

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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Karen Tilevsky		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address P.O. Box 31		Transaction ID: C20280	
City Moss Beach	State CA	Zip Code 94038	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Fullbloom Baking Co	Occupation Baker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Anna May Timmons		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5	
Mailing Address 1150 SW Chapman Way, Apt. 305		Transaction ID: C19992	
City Palm City	State FL	Zip Code 34990-2468	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Myron Tribus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 4318 Whiteleaf Court		Transaction ID: C18008	
City Pensacola	State FL	Zip Code 32504-4950	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

SUBTOTAL of Receipts This Page (optional) ▶	525.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Myron Tribus

Mailing Address 4318 Whiteleaf Court

City State Zip Code
Pensacola FL 32504-4950

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

Transaction ID: C18834

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Myron Tribus

Mailing Address 4318 Whiteleaf Court

City State Zip Code
Pensacola FL 32504-4950

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

Transaction ID: C19451

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
David N. M. Turch

Mailing Address 517 2nd Street, NE

City State Zip Code
Washington DC 20002

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

Name of Employer David Turch & Associates Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C20830

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
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 81 / 159						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Jan Tuttleman		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 5	
Mailing Address 7791 Starlight Drive		Transaction ID: C19534	
City State Zip Code La Jolla CA 92037		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Tuttsons Capital Corp. Occupation Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Laszlo Varga		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5	
Mailing Address 1627 Clower Creek Dr.		Transaction ID: C17253	
City State Zip Code Sarasota FL 34231-8925		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Laszlo Varga		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 5	
Mailing Address 1627 Clower Creek Dr.		Transaction ID: C17627	
City State Zip Code Sarasota FL 34231-8925		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
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 82 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Laszlo Varga		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5	
Mailing Address 1627 Clower Creek Dr.		Transaction ID: C21429	
City State Zip Code Sarasota FL 34231-8925	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Viejas Tribal Government		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 5	
Mailing Address 1 Viejas Grade Road		Transaction ID: C16564	
City State Zip Code Alpine CA 91901	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sovereign	Occupation Nation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Estelle Voeller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 1365 Tolman Creek Road		Transaction ID: C20079	
City State Zip Code Ashland OR 97520	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Caregiver		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	5200.00
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 83 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Mary Wagner		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2005	
Mailing Address 3811 N. Hamlin Avenue		Transaction ID: C17800	
City State Zip Code Chicago IL 60618-4009		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation MK Films Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mary Wagner		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2005	
Mailing Address 3811 N. Hamlin Avenue		Transaction ID: C18724	
City State Zip Code Chicago IL 60618-4009		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation MK Films Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. William Wascher		Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2005	
Mailing Address 236 Clara Street, Apt. 1		Transaction ID: C20410	
City State Zip Code San Francisco CA 94107-1064		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Eleanor Wasson

Mailing Address 660 Escalona Drive

City State Zip Code
Santa Cruz CA 95060-2639

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: C19940

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Daniel Waterhouse

Mailing Address P.O. Box N

City State Zip Code
Wasco CA 93280

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

Name of Employer Self Employed Occupation Farmer

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 9 / 1 9 / 2 0 0 5

Transaction ID: C17928

Amount of Each Receipt this Period
500.00

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

Mailing Address 834 Bay Street

City State Zip Code
San Francisco CA 94109

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

Name of Employer Self Employed Occupation Business Owner

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 8 / 1 5 / 2 0 0 5

Transaction ID: C17517

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	850.00
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 85 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Julie Waxman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 1465 Capri Drive		Transaction ID: C19252	
City State Zip Code Pacific Palisades CA 90272		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Steven Bochco Productions, Inc. Business Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ellen T. Wayne		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5	
Mailing Address 4710 Delafield Avenue		Transaction ID: C17429	
City State Zip Code Bronx NY 10471-3312		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Brooklyn College Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mark Weisgerber		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 5	
Mailing Address 7620 Hollister Ave, #111		Transaction ID: C16844	
City State Zip Code Goleta CA 93117		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Fidelity National Title Title Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	450.00
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 86 / 159
	(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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Mark Weisgerber		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 7620 Hollister Ave, #111		Transaction ID: C20096	
City State Zip Code Goleta CA 93117	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Fidelity National Title	Occupation Title Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Craig Whipps		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 2174 Western Ave.		Transaction ID: C21618	
City State Zip Code Arcata CA 95521	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Activist/Musician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Bruce F. Whizin		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5	
Mailing Address 4458 Matilija Ave		Transaction ID: C17092	
City State Zip Code Sherman Oaks CA 91423	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
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 87 / 159
	(check only one)
<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. John Wilson		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 4550 18th Street		Transaction ID: C21397	
City State Zip Code San Francisco CA 94114-1871		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer San Francisco State University		Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Robert Wilson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 114 Marinero Circle		Transaction ID: C20380	
City State Zip Code Tiburon CA 94920		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Anne Wolfgang		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 5	
Mailing Address 96 Hope Valley Road		Transaction ID: C16781	
City State Zip Code Amston CT 06231		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed		Occupation Potter	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 159
	<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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Nancy Zirkin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 6419 Shadow Road		Transaction ID: C20807	
City State Zip Code Chevy Chase MD 20815		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Leadership Conf. for Civil Rights		Occupation Deputy Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) John Zwiebel		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 5	
Mailing Address 101 Baymount Street		Transaction ID: C16632	
City State Zip Code Santa Cruz CA 95062-3459		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Cisco Systems		Occupation Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00	

C. Full Name (Last, First, Middle Initial) John Zwiebel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 101 Baymount Street		Transaction ID: C20070	
City State Zip Code Santa Cruz CA 95062-3459		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Cisco Systems		Occupation Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00	

SUBTOTAL of Receipts This Page (optional) ▶	1125.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 159
	<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. John Zwiebel		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address 101 Baymount Street		Transaction ID: C21642
City State Zip Code Santa Cruz CA 95062-3459	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Cisco Systems Software Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) B. VPR Associates LLC		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 5
Mailing Address 1620 L Street NW, Suite 1210		Transaction ID: C17931
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation VPR Associates LLC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial) C. Vincent P. Reusing		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 5
Mailing Address 114 Madison Place		Transaction ID: C23660
City State Zip Code Alexandria VA 22314-1760	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation VPR Associates LLC Principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	129917.42

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

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

FOR LINE NUMBER: PAGE 90 / 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
AFSCME - PEOPLE PAC

Mailing Address 1625 L Street, NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

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
07 / 13 / 2005

Transaction ID: C13550

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Amalgamated Transit Union COPE

Mailing Address 5025 Wisconsin Avenue, NW

City State Zip Code
Washington DC 20016-4139

FEC ID number of contributing federal political committee. **C** C00032995

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
11 / 21 / 2005

Transaction ID: C20829

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
AT&T PAC

Mailing Address 32 Ave. of the Americas

City State Zip Code
New York NY 10013

FEC ID number of contributing federal political committee. **C** C00342048

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
11 / 21 / 2005

Transaction ID: C20823

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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 91 / 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Bricklayers and Allied Craftworkers PAC

Mailing Address 1776 Eye Street, NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00003632

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 Y
1 1 / 2 1 / 2 0 0 5

Transaction ID: C20822

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Comcast Corporation PAC

Mailing Address 1500 Market Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C** C00248716

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 Y
1 2 / 2 9 / 2 0 0 5

Transaction ID: C21058

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
eBay Inc. Comm. For Respon. Internet Commerce

Mailing Address 228 S. Washington Street, Suite 11

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00342394

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 Y
1 2 / 0 5 / 2 0 0 5

Transaction ID: C20931

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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 92 / 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Federal Express Political Action Committee

Mailing Address P.O. Box 529

City State Zip Code
Washington DC 20044-0529

FEC ID number of contributing federal political committee. **C** C00068692

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
 1 2 / 2 9 / 2 0 0 5

Transaction ID: C21056

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Feminist Majority PAC

Mailing Address 1600 Wilson Blvd., Suite 801

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00377168

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 Y
 1 2 / 2 9 / 2 0 0 5

Transaction ID: C21075

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
International Org. of Master, Mates, & Pilots

Mailing Address 700 Maritime Blvd.

City State Zip Code
Linthicum MD 21090

FEC ID number of contributing federal political committee. **C** C00073056

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
 1 2 / 1 6 / 2 0 0 5

Transaction ID: C21007

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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 93 / 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Laborer's Political League

Mailing Address 905 16th Street NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007922

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
1 2 / 2 9 / 2 0 0 5

Transaction ID: C21057

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Loni Hancock For Assembly 2006

Mailing Address 5429 Madison Avenue

City State Zip Code
Sacramento CA 95841

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 0 5

Transaction ID: C16391

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MCI Employees PAC

Mailing Address 1133 19th Street, NW

City State Zip Code
Washington DC 20036-3604

FEC ID number of contributing federal political committee. **C** C00142836

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
1 1 / 2 1 / 2 0 0 5

Transaction ID: C20815

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **7750.00**

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 94 / 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
MEBA Political Action Fund

Mailing Address 444 N. Capitol Street, Suite 800

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00279380

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
1 1 / 2 1 / 2 0 0 5

Transaction ID: C20818

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Assoc. PAC

Mailing Address 1325 Massachusetts Avenue, NW

City State Zip Code
Washington DC 20005

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

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
1 1 / 2 1 / 2 0 0 5

Transaction ID: C20820

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
National Association of Realtors PAC

Mailing Address 430 N. Michigan Avenue

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 0 8 / 2 0 0 5

Transaction ID: C16566

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **12000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 159
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) National Organization for Women PAC Mailing Address 1100 H Street NW, Third Floor City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C C00092247 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5 Transaction ID: C20831 Amount of Each Receipt this Period 1000.00
---	--	---

B. Full Name (Last, First, Middle Initial) National Venture Capital Assn. PAC Mailing Address 1655 N. Fort Myer Drive, Suite 850 City Arlington State VA Zip Code 22209 FEC ID number of contributing federal political committee. C C00150367 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5 Transaction ID: C20821 Amount of Each Receipt this Period 2500.00
--	--	---

C. Full Name (Last, First, Middle Initial) News America Holdings Inc. Fox PAC Mailing Address 444 N. Capitol Street, Suite 740 City Washington State DC Zip Code 20001 FEC ID number of contributing federal political committee. C C00330019 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5 Transaction ID: C20819 Amount of Each Receipt this Period 1000.00
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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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 159
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Qualcomm, Inc. Political Action Committee

Mailing Address 2001 Pennsylvania Avenue NW, Suite

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00339085

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
1 1 / 2 1 / 2 0 0 5

Transaction ID: C20817

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Raytheon Political Action Committee

Mailing Address 1100 Wilson Blvd, Suite 1500

City State Zip Code
Arlington VA 22209-2297

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

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
1 2 / 1 2 / 2 0 0 5

Transaction ID: C20966

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Recording Industry of America PAC

Mailing Address 1330 Connecticut Avenue NW, Suite

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00009357

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
1 1 / 2 1 / 2 0 0 5

Transaction ID: C20826

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 97 / 159
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
The Walt Disney Co. Employees PAC

Mailing Address A Multi-Candidate Committee
1150 17th Street NW Suite 400

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00197749

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
11 / 21 / 2005

Transaction ID: C20828

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Universal Music Group PAC

Mailing Address P.O. Box 560519

City State Zip Code
Charlotte NC 28256-0519

FEC ID number of contributing federal political committee. **C** C00392464

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2005

Transaction ID: C20967

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Yahoo! Inc. Political Action Committee

Mailing Address 2000 Pennsylvania Avenue NW, Suite

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00380535

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
12 / 05 / 2005

Transaction ID: C20930

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	▶	5500.00
TOTAL This Period (last page this line number only)	▶	57250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 98 / 159	
	(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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) PAC For a Change

A. Full Name (Last, First, Middle Initial) Marilyn Rosenthal	
Mailing Address 760 Brockway Road	
City Hopkinton	State NH
Zip Code 03229-2038	
FEC ID number of contributing federal political committee.	C
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.28

Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Transaction ID: C21061
Amount of Each Receipt this Period 235.28
Refund of Travel Expenses

SUBTOTAL of Receipts This Page (optional)	▶	235.28
TOTAL This Period (last page this line number only)	▶	235.28

**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 / 159
	<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 type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. California Bank & Trust		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 550 S. Hope Street, #100		Transaction ID: C21870	
City State Zip Code Los Angeles CA 90071	Amount of Each Receipt this Period 51.09		
FEC ID number of contributing federal political committee. C	Interest		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 624.74		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. California Bank & Trust		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 550 S. Hope Street, #100		Transaction ID: C21871	
City State Zip Code Los Angeles CA 90071	Amount of Each Receipt this Period 2.13		
FEC ID number of contributing federal political committee. C	Interest		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 624.74		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. California Bank & Trust		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 550 S. Hope Street, #100		Transaction ID: C21060	
City State Zip Code Los Angeles CA 90071	Amount of Each Receipt this Period 64.04		
FEC ID number of contributing federal political committee. C	Interest		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 624.74		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	117.26
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 159
	<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 type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. California Bank & Trust		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 550 S. Hope Street, #100		Transaction ID: C21902	
City State Zip Code Los Angeles CA 90071	Amount of Each Receipt this Period .01		
FEC ID number of contributing federal political committee. C	Interest		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 624.74		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. California Bank & Trust		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5	
Mailing Address 550 S. Hope Street, #100		Transaction ID: C21907	
City State Zip Code Los Angeles CA 90071	Amount of Each Receipt this Period 14.97		
FEC ID number of contributing federal political committee. C	Interest		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 624.74		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Merrill Lynch		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5	
Mailing Address 1325 Franklin Avenue		Transaction ID: C20948	
City State Zip Code Garden City NY 11530	Amount of Each Receipt this Period 31.40		
FEC ID number of contributing federal political committee. C	Interest		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 587.17		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	46.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 159
	<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 type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Merrill Lynch		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2005
Mailing Address 1325 Franklin Avenue		Transaction ID: C20949
City State Zip Code Garden City NY 11530	Amount of Each Receipt this Period 121.16	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 587.17	Interest

Full Name (Last, First, Middle Initial) B. Merrill Lynch		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2005
Mailing Address 1325 Franklin Avenue		Transaction ID: C20950
City State Zip Code Garden City NY 11530	Amount of Each Receipt this Period 132.82	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 587.17	Interest

Full Name (Last, First, Middle Initial) C. Merrill Lynch		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2005
Mailing Address 1325 Franklin Avenue		Transaction ID: C21059
City State Zip Code Garden City NY 11530	Amount of Each Receipt this Period 137.36	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 587.17	Interest

SUBTOTAL of Receipts This Page (optional) ▶	391.34
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 102 / 159	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Merrill Lynch

Mailing Address 1325 Franklin Avenue

City State Zip Code
Garden City NY 11530

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
587.17

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	0	5

Transaction ID: C21906

Amount of Each Receipt this Period
164.43

Interest

SUBTOTAL of Receipts This Page (optional)	▶	164.43
TOTAL This Period (last page this line number only)	▶	719.41

**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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. American Mailing Services, Inc.		Transaction ID: D1548 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 908 N. Hollywood Way		Amount of Each Disbursement this Period 21029.70
City Burbank State CA Zip Code 91505	Purpose of Disbursement PAC Mailhouse Services/Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Andrew Wender		Transaction ID: D1549 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 2258 Wellesley Avenue		Amount of Each Disbursement this Period 35.00
City Los Angeles State CA Zip Code 90064	Purpose of Disbursement Administrative Consulting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Andrew Wender		Transaction ID: D1550 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 2258 Wellesley Avenue		Amount of Each Disbursement this Period 210.00
City Los Angeles State CA Zip Code 90064	Purpose of Disbursement Administrative Consulting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	21274.70
TOTAL 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 104 / 159

<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Andrew Wender		Transaction ID: D1656 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 2258 Wellesley Avenue		Amount of Each Disbursement this Period 140.00
City Los Angeles State CA Zip Code 90064	Category/ Type	
Purpose of Disbursement Administrative Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Andrew Wender		Transaction ID: D1693 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address 2258 Wellesley Avenue		Amount of Each Disbursement this Period 105.00
City Los Angeles State CA Zip Code 90064	Category/ Type	
Purpose of Disbursement Administrative Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Articulated Man, Inc.		Transaction ID: D1559 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 1508 W. Sunnyside Avenue		Amount of Each Disbursement this Period 3959.00
City Chicago State IL Zip Code 60640	Category/ Type	
Purpose of Disbursement Website Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4204.00
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Articulated Man, Inc.		Transaction ID: D1560 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 5
Mailing Address 1508 W. Sunnyside Avenue		Amount of Each Disbursement this Period 127.00
City Chicago State IL Zip Code 60640	Purpose of Disbursement Website Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Articulated Man, Inc.		Transaction ID: D1558 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 5
Mailing Address 1508 W. Sunnyside Avenue		Amount of Each Disbursement this Period 115.00
City Chicago State IL Zip Code 60640	Purpose of Disbursement Website Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Articulated Man, Inc.		Transaction ID: D1557 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 1508 W. Sunnyside Avenue		Amount of Each Disbursement this Period 115.00
City Chicago State IL Zip Code 60640	Purpose of Disbursement Website Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	357.00
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Articulated Man, Inc.		Transaction ID: D1658 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 1508 W. Sunnyside Avenue		Amount of Each Disbursement this Period 115.00
City Chicago State IL Zip Code 60640	Purpose of Disbursement Website Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Articulated Man, Inc.		Transaction ID: D1695 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 5
Mailing Address 1508 W. Sunnyside Avenue		Amount of Each Disbursement this Period 115.00
City Chicago State IL Zip Code 60640	Purpose of Disbursement Website Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: D1561 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 5
Mailing Address 333 S. Beaudry Street, 18th Floor		Amount of Each Disbursement this Period 95.00
City Los Angeles State CA Zip Code 90017	Purpose of Disbursement Bank Charges Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	325.00
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)

PAGE 107 / 159

<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Barbara Boxer		Transaction ID: D1696 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5
Mailing Address 112 Hart Senate Office Building		Amount of Each Disbursement this Period 235.28
City Washington State DC Zip Code 20002	Purpose of Disbursement Reim.of Travel Expenses for PAC Activity Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Betty Zlatchin Catering, LLC		Transaction ID: D1697 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 5
Mailing Address 1177 Indiana Street		Amount of Each Disbursement this Period 3486.84
City San Francisco State CA Zip Code 94107	Purpose of Disbursement PAC Fundraising Event Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Blackrock Associates, LLC		Transaction ID: D1567 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 5
Mailing Address 1072 Jackson Street		Amount of Each Disbursement this Period 8231.66
City San Francisco State CA Zip Code 94133	Purpose of Disbursement Website Maintenance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	11953.78
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)

PAGE 108 / 159

<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Blackrock Associates, LLC		Transaction ID: D1565 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2005
Mailing Address 1072 Jackson Street		Amount of Each Disbursement this Period 5429.60
City San Francisco State CA Zip Code 94133	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Blackrock Associates, LLC		Transaction ID: D1566 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2005
Mailing Address 1072 Jackson Street		Amount of Each Disbursement this Period 5993.08
City San Francisco State CA Zip Code 94133	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Blackrock Associates, LLC		Transaction ID: D1568 Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2005
Mailing Address 1072 Jackson Street		Amount of Each Disbursement this Period 3290.00
City San Francisco State CA Zip Code 94133	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	14712.68
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)

PAGE 109 / 159

<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Blackrock Associates, LLC		Transaction ID: D1659 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address 1072 Jackson Street		Amount of Each Disbursement this Period 7200.00
City San Francisco State CA Zip Code 94133	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Blackrock Associates, LLC		Transaction ID: D1698 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5
Mailing Address 1072 Jackson Street		Amount of Each Disbursement this Period 3747.00
City San Francisco State CA Zip Code 94133	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cablevision		Transaction ID: D1570 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 5
Mailing Address POB 9202		Amount of Each Disbursement this Period 35.96
City Uniondale State NY Zip Code 11555-9202	Category/ Type	
Purpose of Disbursement Internet Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10982.96
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)

PAGE 110 / 159

<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Cablevision		Transaction ID: D1569 Date of Disbursement 08 / 27 / 2005
Mailing Address POB 9202		Amount of Each Disbursement this Period 35.96
City Uniondale State NY Zip Code 11555-9202	Purpose of Disbursement Internet Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cablevision		Transaction ID: D1571 Date of Disbursement 09 / 27 / 2005
Mailing Address POB 9202		Amount of Each Disbursement this Period 35.96
City Uniondale State NY Zip Code 11555-9202	Purpose of Disbursement Internet Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cablevision		Transaction ID: D1572 Date of Disbursement 10 / 28 / 2005
Mailing Address POB 9202		Amount of Each Disbursement this Period 35.96
City Uniondale State NY Zip Code 11555-9202	Purpose of Disbursement Internet Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	107.88
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Cablevision		Transaction ID: D1661 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 5
Mailing Address POB 9202		Amount of Each Disbursement this Period 35.96
City Uniondale State NY Zip Code 11555-9202	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Cablevision		Transaction ID: D1699 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Mailing Address POB 9202		Amount of Each Disbursement this Period 35.96
City Uniondale State NY Zip Code 11555-9202	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. California Bank & Trust		Transaction ID: D1579 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 5
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 1747.14
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Merchant Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1819.06
TOTAL 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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. California Bank & Trust		Transaction ID: D1581 Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2005
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 707.22
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Merchant Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. California Bank & Trust		Transaction ID: D1578 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2005
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 766.99
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Merchant Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. California Bank & Trust		Transaction ID: D1583 Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2005
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 91.89
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1566.10
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. California Bank & Trust		Transaction ID: D1662 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 5
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 1218.44
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Merchant Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. California Bank & Trust		Transaction ID: D1702 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 419.26
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. California Bank & Trust		Transaction ID: D1701 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 50.00
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1687.70
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Campaign Finance Consultants, Inc.		Transaction ID: D1667 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address 10 G Street N.E. Suite 470		Amount of Each Disbursement this Period 9.85
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC Fundraising Event Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Campaign Finance Consultants, Inc.		Transaction ID: D1665 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address 10 G Street N.E. Suite 470		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC Fundraising Consulting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Campaign Finance Consultants, Inc.		Transaction ID: D1666 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address 10 G Street N.E. Suite 470		Amount of Each Disbursement this Period 148.20
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC Fundraising Event Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5158.05
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Campaign Finance Consultants, Inc.		Transaction ID: D1664 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address 10 G Street N.E. Suite 470		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC Fundraising Consulting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Campaign Finance Consultants, Inc.		Transaction ID: D1706 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 10 G Street N.E. Suite 470		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC Fundraising Consulting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Campaign Finance Consultants, Inc.		Transaction ID: D1703 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 10 G Street N.E. Suite 470		Amount of Each Disbursement this Period 4.30
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC Fundraising Event Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	10004.30
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Campaign Finance Consultants, Inc.		Transaction ID: D1704 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 10 G Street N.E. Suite 470		Amount of Each Disbursement this Period 222.00
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC Fundraising Event Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Campaign Finance Consultants, Inc.		Transaction ID: D1705 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 10 G Street N.E. Suite 470		Amount of Each Disbursement this Period 3057.15
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC Fundraising Event Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. CTSG, A Division of Kintera Inc.		Transaction ID: D1587 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 5
Mailing Address 456 Charnelton Street		Amount of Each Disbursement this Period 698.00
City Eugene State OR Zip Code 97401	Purpose of Disbursement Website Maintenance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3977.15
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. CTSG, A Division of Kintera Inc.		Transaction ID: D1586 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 5
Mailing Address 456 Charnelton Street		Amount of Each Disbursement this Period 160.00
City Eugene State OR Zip Code 97401	Purpose of Disbursement Website Maintenance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Douglas Boxer & Associates, Inc.		Transaction ID: D1593 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 5
Mailing Address 854 Longridge Road		Amount of Each Disbursement this Period 5000.00
City Oakland State CA Zip Code 94610	Purpose of Disbursement PAC Political Consulting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Douglas Boxer & Associates, Inc.		Transaction ID: D1590 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 5
Mailing Address 854 Longridge Road		Amount of Each Disbursement this Period 5000.00
City Oakland State CA Zip Code 94610	Purpose of Disbursement PAC Political Consulting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	10160.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Douglas Boxer & Associates, Inc.		Transaction ID: D1591 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 5
Mailing Address 854 Longridge Road		Amount of Each Disbursement this Period 5000.00
City Oakland State CA Zip Code 94610	Category/ Type	
Purpose of Disbursement PAC Political Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Douglas Boxer & Associates, Inc.		Transaction ID: D1592 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address 854 Longridge Road		Amount of Each Disbursement this Period 5000.00
City Oakland State CA Zip Code 94610	Category/ Type	
Purpose of Disbursement PAC Political Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Douglas Boxer & Associates, Inc.		Transaction ID: D1669 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address 854 Longridge Road		Amount of Each Disbursement this Period 5000.00
City Oakland State CA Zip Code 94610	Category/ Type	
Purpose of Disbursement PAC Political Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Douglas Boxer & Associates, Inc.		Transaction ID: D1707 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 854 Longridge Road		Amount of Each Disbursement this Period 5000.00
City Oakland	State CA	
Zip Code 94610		
Purpose of Disbursement PAC Political Consulting Fees		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Federal Express		Transaction ID: D1595 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 5
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 36.51
City Memphis	State TN	
Zip Code 38101		
Purpose of Disbursement PAC Shipping/Postage		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: D1594 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 86.38
City Memphis	State TN	
Zip Code 38101		
Purpose of Disbursement PAC Shipping/Postage		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	5122.89
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: D1671 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 34.75
City Memphis State TN Zip Code 38101		
Purpose of Disbursement PAC Shipping/Postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Federal Express		Transaction ID: D1670 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 5
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 131.00
City Memphis State TN Zip Code 38101		
Purpose of Disbursement PAC Shipping/Postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: D1708 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 45.82
City Memphis State TN Zip Code 38101		
Purpose of Disbursement PAC Shipping/Postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	211.57
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Friends of Barbara Boxer		Transaction ID: D1691 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 5
Mailing Address P.O. Box 641751		Amount of Each Disbursement this Period -4364.34
City Los Angeles State CA Zip Code 90064	Reissued in Current Period	
Purpose of Disbursement Check Voided: List Rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Barbara Boxer		Transaction ID: D1598 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 5
Mailing Address P.O. Box 641751		Amount of Each Disbursement this Period 4364.34
City Los Angeles State CA Zip Code 90064	Category/ Type	
Purpose of Disbursement FMV of List Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Barbara Boxer		Transaction ID: D1599 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address P.O. Box 641751		Amount of Each Disbursement this Period 3212.70
City Los Angeles State CA Zip Code 90064	Category/ Type	
Purpose of Disbursement FMV of List Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3212.70
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Get Active Software, Inc.		Transaction ID: D1602 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 5
Mailing Address 2855 Telegraph Avenue, Suite 600		Amount of Each Disbursement this Period 1600.00
City Berkeley State CA Zip Code 94705	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Get Active Software, Inc.		Transaction ID: D1600 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 5
Mailing Address 2855 Telegraph Avenue, Suite 600		Amount of Each Disbursement this Period 1600.00
City Berkeley State CA Zip Code 94705	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Get Active Software, Inc.		Transaction ID: D1603 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 5
Mailing Address 2855 Telegraph Avenue, Suite 600		Amount of Each Disbursement this Period 1600.00
City Berkeley State CA Zip Code 94705	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Get Active Software, Inc.		Transaction ID: D1601 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 2855 Telegraph Avenue, Suite 600		Amount of Each Disbursement this Period 1600.00
City Berkeley State CA Zip Code 94705	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Get Active Software, Inc.		Transaction ID: D1710 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 2855 Telegraph Avenue, Suite 600		Amount of Each Disbursement this Period 1600.00
City Berkeley State CA Zip Code 94705	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Get Active Software, Inc.		Transaction ID: D1709 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5
Mailing Address 2855 Telegraph Avenue, Suite 600		Amount of Each Disbursement this Period 1200.00
City Berkeley State CA Zip Code 94705	Category/ Type	
Purpose of Disbursement Website Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4400.00
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Harris Services, Inc.		Transaction ID: D1673 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 5
Mailing Address 413 Calvert Avenue		Amount of Each Disbursement this Period 738.05
City Alexandria State VA Zip Code 22301	Purpose of Disbursement Office Expenses	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hungerford Printers		Transaction ID: D1713 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address 2207 Shannon Place S.E.		Amount of Each Disbursement this Period 970.79
City Washington State DC Zip Code 20020	Purpose of Disbursement PAC Printing Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Integrity Partners & Associates, LLC		Transaction ID: D1608 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 5
Mailing Address 601 S. Glenoaks Suite 211		Amount of Each Disbursement this Period 6313.00
City Burbank State CA Zip Code 90502	Purpose of Disbursement PAC Fundraising Consulting Fees	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8021.84
TOTAL 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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Kaufman Downing LLP		Transaction ID: D1613 Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2005
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 320.96
City Los Angeles State CA Zip Code 90017-5864		
Purpose of Disbursement Legal & Treasury Expenses	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kaufman Downing LLP		Transaction ID: D1609 Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2005
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 2882.50
City Los Angeles State CA Zip Code 90017-5864		
Purpose of Disbursement Legal & Treasury Fees	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kaufman Downing LLP		Transaction ID: D1611 Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2005
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 3496.65
City Los Angeles State CA Zip Code 90017-5864		
Purpose of Disbursement Legal & Treasury Fees	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6700.11
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Kaufman Downing LLP		Transaction ID: D1610 Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2005
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 151.02
City Los Angeles State CA Zip Code 90017-5864	Category/ Type	
Purpose of Disbursement Legal & Treasury Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kaufman Downing LLP		Transaction ID: D1614 Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2005
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 3030.50
City Los Angeles State CA Zip Code 90017-5864	Category/ Type	
Purpose of Disbursement Legal & Treasury Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kaufman Downing LLP		Transaction ID: D1612 Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2005
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 272.87
City Los Angeles State CA Zip Code 90017-5864	Category/ Type	
Purpose of Disbursement Legal & Treasury Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3454.39
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Kaufman Downing LLP		Transaction ID: D1674 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 3339.25
City Los Angeles State CA Zip Code 90017-5864	Category/ Type	
Purpose of Disbursement Legal & Treasury Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kaufman Downing LLP		Transaction ID: D1675 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 604.91
City Los Angeles State CA Zip Code 90017-5864	Category/ Type	
Purpose of Disbursement Legal & Treasury Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kaufman Downing LLP		Transaction ID: D1721 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 95.75
City Los Angeles State CA Zip Code 90017-5864	Category/ Type	
Purpose of Disbursement Legal & Treasury Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4039.91
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Kaufman Downing LLP		Transaction ID: D1720 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 777 S. Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 3996.25
City Los Angeles State CA Zip Code 90017-5864	Category/ Type	
Purpose of Disbursement Legal & Treasury Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Kimball Stroud & Associates, Inc.		Transaction ID: D1617 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 5
Mailing Address 227 Massachusetts Avenue NE #101		Amount of Each Disbursement this Period 1050.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement PAC Fundraising Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Kimball Stroud & Associates, Inc.		Transaction ID: D1615 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 5
Mailing Address 227 Massachusetts Avenue NE #101		Amount of Each Disbursement this Period 750.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement PAC Fundraising Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	5796.25
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Kimball Stroud & Associates, Inc.		Transaction ID: D1616 Date of Disbursement 08 / 20 / 2005
Mailing Address 227 Massachusetts Avenue NE #101		Amount of Each Disbursement this Period 1350.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement PAC Fundraising Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kimball Stroud & Associates, Inc.		Transaction ID: D1619 Date of Disbursement 09 / 27 / 2005
Mailing Address 227 Massachusetts Avenue NE #101		Amount of Each Disbursement this Period 155.68
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement PAC Fundraising Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kimball Stroud & Associates, Inc.		Transaction ID: D1618 Date of Disbursement 09 / 27 / 2005
Mailing Address 227 Massachusetts Avenue NE #101		Amount of Each Disbursement this Period 1012.50
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement PAC Fundraising Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2518.18
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Gloria Littman		Transaction ID: D1607 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 4 / 2 0 0 5
Mailing Address 109 Croyden Ct.		Amount of Each Disbursement this Period 975.00
City Albertson State NY Zip Code 11507-2207	Purpose of Disbursement Accounting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B. Full Name (Last, First, Middle Initial) Gloria Littman		Transaction ID: D1606 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 5
Mailing Address 109 Croyden Ct.		Amount of Each Disbursement this Period 900.00
City Albertson State NY Zip Code 11507-2207	Purpose of Disbursement Accounting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C. Full Name (Last, First, Middle Initial) Gloria Littman		Transaction ID: D1605 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 5
Mailing Address 109 Croyden Ct.		Amount of Each Disbursement this Period 375.00
City Albertson State NY Zip Code 11507-2207	Purpose of Disbursement Accounting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2250.00
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Gloria Littman		Transaction ID: D1604 Date of Disbursement 10 / 07 / 2005	
Mailing Address 109 Croyden Ct.		Amount of Each Disbursement this Period 525.00	
City Albertson	State NY	Zip Code 11507-2207	Category/ Type
Purpose of Disbursement Accounting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Gloria Littman		Transaction ID: D1672 Date of Disbursement 11 / 01 / 2005	
Mailing Address 109 Croyden Ct.		Amount of Each Disbursement this Period 450.00	
City Albertson	State NY	Zip Code 11507-2207	Category/ Type
Purpose of Disbursement Accounting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Gloria Littman		Transaction ID: D1711 Date of Disbursement 12 / 01 / 2005	
Mailing Address 109 Croyden Ct.		Amount of Each Disbursement this Period 825.00	
City Albertson	State NY	Zip Code 11507-2207	Category/ Type
Purpose of Disbursement Accounting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	1800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. NGP Software, Inc.		Transaction ID: D1621 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 5
Mailing Address 5505 Connecticut Ave., NW		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20015	Purpose of Disbursement DataBase Software Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Precision Printing & Design		Transaction ID: D1626 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 14544 Keswick Street		Amount of Each Disbursement this Period 16681.05
City Van Nuys State CA Zip Code 91405	Purpose of Disbursement PAC Printing Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Precision Printing & Design		Transaction ID: D1676 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 14544 Keswick Street		Amount of Each Disbursement this Period 200.00
City Van Nuys State CA Zip Code 91405	Purpose of Disbursement PAC Printing Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	18381.05
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: D1681 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address 860 Willis Avenue		Amount of Each Disbursement this Period 22.20
City Albertson State NY Zip Code 11507	Purpose of Disbursement PAC Postage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: D1686 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 126.16
City Baltimore State MD Zip Code 21297-1464	Purpose of Disbursement Wireless Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: D1727 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 5
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 78.19
City Baltimore State MD Zip Code 21297-1464	Purpose of Disbursement Wireless Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	226.55
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: D1639 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 4 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 158.31
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D1638 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 4 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 24.22
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: D1650 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 17.84
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	200.37
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: D1648 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 22.52
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D1649 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 150.96
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: D1647 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 18.45
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	191.93
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: D1646 Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2005
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 21.77
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D1645 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2005
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 153.20
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: D1644 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2005
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 17.87
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	192.84
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: D1643 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 152.59
City Albany State NY Zip Code 22500	Category/ Type	
Purpose of Disbursement Telephone Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D1642 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 21.40
City Albany State NY Zip Code 22500	Category/ Type	
Purpose of Disbursement Telephone Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: D1640 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 46.42
City Albany State NY Zip Code 22500	Category/ Type	
Purpose of Disbursement Telephone Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	220.41
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: D1641 Date of Disbursement 10 / 19 / 2005
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 18.24
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D1683 Date of Disbursement 11 / 01 / 2005
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 22.95
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: D1682 Date of Disbursement 11 / 01 / 2005
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 143.58
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	184.77
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: D1685 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 18.33
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D1684 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 188.94
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: D1725 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 17.53
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	224.80
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: D1726 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 153.50
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D1724 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 18.24
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: D1723 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 103.89
City Albany State NY Zip Code 22500	Purpose of Disbursement Telephone Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	275.63
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: D1544 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2005
Mailing Address P.O. Box 360002		Amount of Each Disbursement this Period 13.60
City Chicago State IL Zip Code 33336	Purpose of Disbursement Credit Card Payment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: D1545 Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2005
Mailing Address P.O. Box 360002		Amount of Each Disbursement this Period 13.60
City Chicago State IL Zip Code 33336	Purpose of Disbursement Credit Card Payment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: D1546 Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2005
Mailing Address P.O. Box 360002		Amount of Each Disbursement this Period 13.60
City Chicago State IL Zip Code 33336	Purpose of Disbursement Credit Card Payment- see below Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	40.80
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: D1547 Date of Disbursement 10 / 07 / 2005
Mailing Address P.O. Box 360002		Amount of Each Disbursement this Period 157.86
City Chicago State IL Zip Code 33336	Purpose of Disbursement Credit Card Payment- see below Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: D1635 Date of Disbursement 10 / 07 / 2005
Mailing Address 7 Voice Road		Amount of Each Disbursement this Period 144.26
City Carle Place State NY Zip Code 11514	Purpose of Disbursement Office Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Bank of Marin		Transaction ID: D1562 Date of Disbursement 07 / 09 / 2005
Mailing Address Credit Card Processing Center PO Box L		Amount of Each Disbursement this Period 610.69
City Novato State CA Zip Code 94948-0970	Purpose of Disbursement Credit Card Payment- see below Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	768.55
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. The Regency		Transaction ID: D1636 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 5
Mailing Address 540 Park Avenue		Amount of Each Disbursement this Period 539.23
City New York State NY Zip Code 10021	[MEMO ITEM]	
Purpose of Disbursement Meals & Lodging		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. California Bank & Trust		Transaction ID: D1573 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 5
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 30.00
City Los Angeles State CA Zip Code 90071	[MEMO ITEM]	
Purpose of Disbursement Credit Card Payment- see below		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. California Bank & Trust		Transaction ID: D1574 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 5
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 30.00
City Los Angeles State CA Zip Code 90071	[MEMO ITEM]	
Purpose of Disbursement Bank Charges		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	30.00
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. California Bank & Trust		Transaction ID: D1577 Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2005
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 30.00
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Credit Card Payment- see below Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. California Bank & Trust		Transaction ID: D1575 Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2005
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 30.00
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. California Bank & Trust		Transaction ID: D1580 Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2005
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 1802.84
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Credit Card Payment-see below Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1832.84
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Dell Catalog Sales		Transaction ID: D1588 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address One Dell Way		Amount of Each Disbursement this Period 1772.66
City Dell Computers	State TX Zip Code 78682	
Purpose of Disbursement Office Expenses		[MEMO ITEM]
Candidate Name		
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. California Bank & Trust		Transaction ID: D1582 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 5
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 30.00
City Los Angeles	State CA Zip Code 90071	
Purpose of Disbursement Credit Card Payment- see below		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. California Bank & Trust		Transaction ID: D1576 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 5
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 30.00
City Los Angeles	State CA Zip Code 90071	
Purpose of Disbursement Bank Charges		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	30.00
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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. California Bank & Trust		Transaction ID: D1584 Date of Disbursement
Mailing Address 550 S. Hope Street, #100		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>
City Los Angeles	State CA	Zip Code 90071
Purpose of Disbursement Credit Card Payment	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="9.21"/>

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: D1655 Date of Disbursement
Mailing Address P.O. Box 360002		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2005"/>
City Chicago	State IL	Zip Code 33336
Purpose of Disbursement Credit Card Payment	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="13.60"/>

Full Name (Last, First, Middle Initial) C. California Bank & Trust		Transaction ID: D1663 Date of Disbursement
Mailing Address 550 S. Hope Street, #100		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>
City Los Angeles	State CA	Zip Code 90071
Purpose of Disbursement Credit Card Payment	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="616.30"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="639.11"/>
TOTAL 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)

<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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: D1651 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 616.30
City Baltimore State MD Zip Code 21297-1464	[MEMO ITEM]	
Purpose of Disbursement Wireless Services Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: D1692 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 360002		Amount of Each Disbursement this Period 13.60
City Chicago State IL Zip Code 33336	Category/Type	
Purpose of Disbursement Credit Card Payment Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. California Bank & Trust		Transaction ID: D1700 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address 550 S. Hope Street, #100		Amount of Each Disbursement this Period 42.50
City Los Angeles State CA Zip Code 90071	Category/Type	
Purpose of Disbursement Credit Card Payment Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	56.10
TOTAL This Period (last page this line number only) ▶	189736.07

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Ben Nelson for US Senate		Transaction ID: D1715 Date of Disbursement 12 / 03 / 2005	
Mailing Address P.O Box 8666		Amount of Each Disbursement this Period 5000.00	
City Omaha State NE Zip Code 68108	Purpose of Disbursement Contribution	Candidate Name Ben Nelson	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Bill Nelson for U.S. Senate		Transaction ID: D1563 Date of Disbursement 09 / 16 / 2005	
Mailing Address 500 Red Sail Way		Amount of Each Disbursement this Period 5000.00	
City Satellite Beach State FL Zip Code 32937	Purpose of Disbursement Contribution	Candidate Name Bill Nelson	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Bill Nelson for U.S. Senate		Transaction ID: D1564 Date of Disbursement 09 / 28 / 2005	
Mailing Address 500 Red Sail Way		Amount of Each Disbursement this Period 5000.00	
City Satellite Beach State FL Zip Code 32937	Purpose of Disbursement Contribution	Candidate Name Bill Nelson	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Bob Casey for Pennsylvania Committee		Transaction ID: D1660 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 8325 St. Martin's Lane		Amount of Each Disbursement this Period 5000.00
City Philadelphia State PA Zip Code 19118	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Bob Casey		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Council for a Livable World		Transaction ID: D1668 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 322 - 4th Street NE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	012 Category/ Type	
Purpose of Disbursement Federal Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee		Transaction ID: D1654 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 5
Mailing Address 120 Maryland Ave. NE		Amount of Each Disbursement this Period 10000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	16000.00
TOTAL 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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Feinstein For Senate		Transaction ID: D1596 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 5
Mailing Address 601 S. Glenoaks Blvd. Suite 208		Amount of Each Disbursement this Period 5000.00
City Burbank State CA Zip Code 91502		
Purpose of Disbursement Contribution Candidate Name Dianne Feinstein	011 Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Feinstein For Senate		Transaction ID: D1653 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 5
Mailing Address 601 S. Glenoaks Blvd. Suite 208		Amount of Each Disbursement this Period 5000.00
City Burbank State CA Zip Code 91502		
Purpose of Disbursement Contribution Candidate Name Dianne Feinstein	011 Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Harold Ford Jr. for Tennessee		Transaction ID: D1712 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 5
Mailing Address 5120 Barry Road, Suite 1300		Amount of Each Disbursement this Period 5000.00
City Memphis State TN Zip Code 38117		
Purpose of Disbursement Contribution Candidate Name Harold Ford	011 Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL 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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. McKaskill for Missouri		Transaction ID: D1714 Date of Disbursement 12 / 08 / 2005
Mailing Address PO Box 6771		Amount of Each Disbursement this Period 5000.00
City St Louis	State MO	
Zip Code 63144		
Purpose of Disbursement Contribution Candidate Name Claire McKaskill Category/Type 011		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO District: 00		

Full Name (Last, First, Middle Initial) B. Pederson 2006		Transaction ID: D1716 Date of Disbursement 12 / 08 / 2005
Mailing Address 531 E. McDowell Road		Amount of Each Disbursement this Period 2500.00
City Phoenix	State AZ	
Zip Code 85004		
Purpose of Disbursement Contribution Candidate Name Jim Pederson Category/Type 011		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 00		

Full Name (Last, First, Middle Initial) C. Roth for Congress		Transaction ID: D1678 Date of Disbursement 11 / 08 / 2005
Mailing Address PO Box 1107		Amount of Each Disbursement this Period 1000.00
City La Quinta	State CA	
Zip Code 92247-1107		
Purpose of Disbursement Contribution Candidate Name David Roth Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 45		

SUBTOTAL of Disbursements This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Sanders for Senate		Transaction ID: D1717 Date of Disbursement 12 / 08 / 2005	
Mailing Address PO Box 391		Amount of Each Disbursement this Period 5000.00	
City Burlington State VT Zip Code 05402	Purpose of Disbursement Contribution 011 Category/ Type		
Candidate Name Bernie Sanders			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: VT District: 00			

Full Name (Last, First, Middle Initial) B. Victory 2006		Transaction ID: D1728 Date of Disbursement 12 / 08 / 2005	
Mailing Address 712 - 35th Avenue		Amount of Each Disbursement this Period 5000.00	
City Seattle State WA Zip Code 98122	Purpose of Disbursement Federal Contribution Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Whitehouse '06		Transaction ID: D1652 Date of Disbursement 09 / 29 / 2005	
Mailing Address PO Box 150		Amount of Each Disbursement this Period 5000.00	
City Wakefield State RI Zip Code 02880	Purpose of Disbursement Contribution Category/ Type		
Candidate Name Sheldon Whitehouse II			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: RI District: 00			

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PAC For a Change

Full Name (Last, First, Middle Initial) A. Whitehouse '06		Transaction ID: D1687 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 5	
Mailing Address PO Box 150		Amount of Each Disbursement this Period 5000.00	
City Wakefield	State RI	Zip Code 02880	Category/ Type
Purpose of Disbursement Contribution			
Candidate Name Sheldon Whitehouse II			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: RI District: 00		

SUBTOTAL of Disbursements This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	74500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PAC For a Change

Full Name (Last, First, Middle Initial) A. No on 77		Transaction ID: D1622 Date of Disbursement 10 / 21 / 2005	
Mailing Address 8665 Wilshire Blvd, Suite 306		Amount of Each Disbursement this Period 5000.00	
City Beverly Hills State CA Zip Code 90211	Purpose of Disbursement Non Federal Contribution		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special		

Full Name (Last, First, Middle Initial) B. NWPC-Alameda North		Transaction ID: D1623 Date of Disbursement 07 / 13 / 2005	
Mailing Address 454 Lake Park Avenue, PMB 305		Amount of Each Disbursement this Period 5000.00	
City Oakland State CA Zip Code 94610	Purpose of Disbursement Civic Donation		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	10000.00
TOTAL This Period (last page this line number only)	10000.00

Form/Schedule: **F3XA**

Transaction ID:

Expenditures made for Fundraising Consulting Fees, Fundraising Event Expenses, and Fundraising Expenses on Schedule B, all were incurred to raise contributions for PAC For a Change. The Committee did not make fundraising expenditures on behalf of any federal candidates or other committees. In addition, PAC For a Change incurred expenditures for Mailhouse Services/Postage, Postage, and Printing Services in connection with a fundraising solicitation for the Committee. These expenditures did not contain express advocacy in support of any federal candidate and were not used for the purpose of public communications and/or voter drive activity.