

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
League of Conservation Voters Action Fund

ADDRESS (number and street) 1920 L St NW Suite 800
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00252940
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 03 01 2009 through 03 31 2009

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 Patrick Collins

Signature of Treasurer Electronically Filed by Patrick Collins Date 04 17 2009

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
League of Conservation Voters Action Fund

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		205856.19
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	244798.66									
(c) Total Receipts (from Line 19)	36817.08	72239.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	281615.74	278096.11								
7. Total Disbursements (from Line 31)	12013.42	8493.79								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	269602.32	269602.32								
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
League of Conservation Voters Action Fund

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	31640.00	54390.00
(i) Itemized (use Schedule A)	2302.41	7364.96
(ii) Unitemized	33942.41	61754.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	33942.41	61754.96
12. Transfers From Affiliated/Other Party Committees	2680.00	9915.86
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	194.67	569.10
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))	36817.08	72239.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36817.08	72239.92

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.....	263.42	-3773.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	263.42	-3773.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	322.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11750.00	11750.00
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	0.00	0.00
(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))	0.00	0.00
29. Other Disbursements.....	0.00	195.36
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))..	12013.42	8493.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12013.42	8493.79

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)	33942.41	61754.96
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33942.41	61754.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	263.42	-3773.57
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	263.42	-3773.57

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 34
	<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)
League of Conservation Voters Action Fund

A.

Full Name (Last, First, Middle Initial)
Wendy Benchley

Mailing Address 35 Boudinot Street

City State Zip Code
Princeton NJ 08540

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

Name of Employer Occupation
Princeton Borough Govern- Princeton Borough Councilwoman
ment

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: 90415.C56843

Amount of Each Receipt this Period
1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Mary Dayton

Mailing Address 4900 IDS Center

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
Retired Conservationist

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: 90415.C56844

Amount of Each Receipt this Period
1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Nancy Hamill Winter

Mailing Address 5229 South Massbach Road

City State Zip Code
Stockton IL 61085

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

Name of Employer Occupation
Self Farm Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2009

Transaction ID: 90415.C56848

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 34
	<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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Robert Henigson		Date of Receipt
	Mailing Address P.O. Box 345		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 25 / 2009
	City	State	Zip Code
	Deer Harbor	WA	98243
	FEC ID number of contributing federal political committee. C		Transaction ID: 90415.C56845
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
			Receipt

B.	Full Name (Last, First, Middle Initial) John Hirschi		Date of Receipt
	Mailing Address 3305 Buchanan Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 27 / 2009
	City	State	Zip Code
	Wichita Falls	TX	76308-1822
	FEC ID number of contributing federal political committee. C		Transaction ID: 90415.C56846
Name of Employer Self (hirschi Investments)		Occupation Real Estate Investor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2000.00
			Receipt

C.	Full Name (Last, First, Middle Initial) Robert Hoguet		Date of Receipt
	Mailing Address 139 East 79th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 16 / 2009
	City	State	Zip Code
	New York	NY	10021
	FEC ID number of contributing federal political committee. C		Transaction ID: 90415.C56840
Name of Employer Self		Occupation Investment Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 34
(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)
League of Conservation Voters Action Fund

A.

Full Name (Last, First, Middle Initial) Wolf Kahn		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	3		2	0	0	9													
Mailing Address 217 West 21st Street		Transaction ID: 90415.C56839																				
City New York	State NY	Zip Code 10011																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>	300.00																			
300.00																						
Name of Employer Self	Occupation Artist	Receipt																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>		300.00																			
300.00																						

B.

Full Name (Last, First, Middle Initial) Gene Karpinski		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	9		2	0	0	9													
Mailing Address 807 N Irving Street		Transaction ID: 90320.C56663																				
City Arlington	State VA	Zip Code 22201																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00																			
250.00																						
Name of Employer League Of Conservation Voters	Occupation Executive	Earmarked(Nondeposited)																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>0.00</td></tr> </table>		0.00																			
0.00																						

[MEMO ITEM]
Earmarked For EDWARDS, DONNA, House, MD, 04

C.

Full Name (Last, First, Middle Initial) Adam Lewis		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	3		2	0	0	9													
Mailing Address 517 W. North Street		Transaction ID: 90415.C56851																				
City Aspen	State CO	Zip Code 81611																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>5000.00</td></tr> </table>	5000.00																			
5000.00																						
Name of Employer Self Employed	Occupation Investor	Receipt																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>5000.00</td></tr> </table>		5000.00																			
5000.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"> <tr><td>5300.00</td></tr> </table>	5300.00
5300.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td></tr> </table>	

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

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

FOR LINE NUMBER: PAGE 9 / 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
League of Conservation Voters Action Fund

A. Full Name (Last, First, Middle Initial)
Heidi Nitze

Mailing Address 1 West 72nd Street, Apt. 96

City State Zip Code
New York NY 10023

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

Name of Employer Self Occupation Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 90415.C56841

Amount of Each Receipt this Period: 1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Nita Norman

Mailing Address 12 Berrill Farms Lane

City State Zip Code
Hanover NH 03755

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 ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 90415.C56836

Amount of Each Receipt this Period: 250.00

Receipt

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

Mailing Address 15 East 91st Street

City State Zip Code
New York NY 10128

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

Name of Employer Nrdc Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 90415.C56850

Amount of Each Receipt this Period: 5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **6250.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 34
(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)
League of Conservation Voters Action Fund

A.

Full Name (Last, First, Middle Initial)
Wendy Rockefeller

Mailing Address 15 East 91st Street

City State Zip Code
New York NY 10128

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

Name of Employer Self Occupation Environmentalist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 90415.C56849

Amount of Each Receipt this Period
5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
A. Homer Skinner

Mailing Address 9 Harding Lane

City State Zip Code
Marblehead MA 01945

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 ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 90415.C56838

Amount of Each Receipt this Period
300.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Anne Snyder

Mailing Address 12574 Chicken Mountain Road

City State Zip Code
Orange VA 22960

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
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 90415.C56837

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **5550.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 34
	<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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Jon Spar		Date of Receipt
	Mailing Address 1408 Lobo Ct Ne		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 08 / 2009
	City	State	Zip Code
	Albq.,	NM	87106
	FEC ID number of contributing federal political committee. C		Transaction ID: 90415.C57122
Name of Employer Lovelace Hospital		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 40.00
		<input type="text"/> 120.00	Receipt

B.	Full Name (Last, First, Middle Initial) Jon Spar		Date of Receipt
	Mailing Address 1408 Lobo Ct Ne		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 18 / 2009
	City	State	Zip Code
	Albq.,	NM	87106
	FEC ID number of contributing federal political committee. C		Transaction ID: 90415.C56842
Name of Employer Lovelace Hospital		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1120.00	Receipt

C.	Full Name (Last, First, Middle Initial) Peter Vaughan		Date of Receipt
	Mailing Address 1976 Sheridan Avenue, S.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 24 / 2009
	City	State	Zip Code
	Minneapolis	MN	55405
	FEC ID number of contributing federal political committee. C		Transaction ID: 90415.C56847
Name of Employer Self		Occupation Research Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 3000.00
		<input type="text"/> 3000.00	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4040.00
TOTAL This Period (last page this line number only)	<input type="text"/> 31640.00

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

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

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NAME OF COMMITTEE (In Full)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Alaska Conservation Voters for Clean Gov		Date of Receipt
	Mailing Address 810 N St Ste 203		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Anchorage	AK	99501-3271
	FEC ID number of contributing federal political committee.		Transaction ID: 90415.C57128
	Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="2680.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transfers From Affil./Auth.	
Aggregate Year-to-Date ▼		<input type="text" value="9915.86"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2680.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2680.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 34	
	(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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Adams National Bank		Date of Receipt																					
	Mailing Address 1501 K St NW		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		3	1		2	0	0	9														
	City State Zip Code Washington DC 20005-1401		Transaction ID: 90415.C56829																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 194.67																					
Name of Employer Occupation		Interest Received																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 519.10																						

SUBTOTAL of Receipts This Page (optional)	▶	194.67
TOTAL This Period (last page this line number only)	▶	194.67

**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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Getactive	Transaction ID: 90320.E27052 Date of Disbursement 03 / 17 / 2009
	Mailing Address PO Box 671625	Amount of Each Disbursement this Period 29.25
	City Dallas State TX Zip Code 75267-1625	
	Purpose of Disbursement PAC PORTION OF WEB HOSTING	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) ▼
		PAC PORTION OF WEB HOSTING

B.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27179 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 622227	Amount of Each Disbursement this Period 0.41
	City Orlando State FL Zip Code 32862-2227	
	Purpose of Disbursement Bank Fee	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) ▼
		BANK FEE

C.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27176 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 622227	Amount of Each Disbursement this Period 50.00
	City Orlando State FL Zip Code 32862-2227	
	Purpose of Disbursement Bank Fee	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) ▼
		BANK FEE

SUBTOTAL of Disbursements This Page (optional)	79.66
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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27180 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 622227	
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 2.50
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

B.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27181 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 622227	
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

C.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27182 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 622227	
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

SUBTOTAL of Disbursements This Page (optional)	52.50
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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27187 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 622227	
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 31.31
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

B.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27185 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 622227	
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 0.43
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

C.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27186 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 622227	
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 17.02
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

SUBTOTAL of Disbursements This Page (optional)	▶	48.76
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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27188 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 622227	
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 2.50
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

B.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27177 Date of Disbursement 03 / 19 / 2009
	Mailing Address PO Box 622227	
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 2.50
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

C.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 90415.E27183 Date of Disbursement 03 / 19 / 2009
	Mailing Address PO Box 622227	
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 77.50
	Purpose of Disbursement Bank Fee 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) ▼
		BANK FEE

SUBTOTAL of Disbursements This Page (optional)	82.50
TOTAL This Period (last page this line number only)	263.42

**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)
League of Conservation Voters Action Fund

A. Full Name (Last, First, Middle Initial) Arcuri For Congress Mailing Address P.O. Box 8508 City Utica State NY Zip Code 13505- Purpose of Disbursement 03/24/09 EVENT; NY-24 US HOUSE Candidate Name MICHAEL A ARCURI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90325.E27114 Date of Disbursement 03 / 24 / 2009
	Amount of Each Disbursement this Period 250.00 03/24/09 EVENT; NY-24 US HOUSE

B. Full Name (Last, First, Middle Initial) Bennet for Colorado Mailing Address 426 C St NE City Washington State DC Zip Code 20002-5839 Purpose of Disbursement 3/10/09 EVENT; CO-US SENATE Candidate Name MICHAEL F BENNET Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90311.E27025 Date of Disbursement 03 / 10 / 2009
	Amount of Each Disbursement this Period 250.00 3/10/09 EVENT; CO-US SENA-TE

C. Full Name (Last, First, Middle Initial) Blumenauer For Congress Mailing Address 830 NE Holladay St Ste 105 City Portland State OR Zip Code 97232-5105 Purpose of Disbursement 3/11/09 EVENT; OR-03 US HOUSE Candidate Name EARL BLUMENAUER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90309.E27006 Date of Disbursement 03 / 06 / 2009
	Amount of Each Disbursement this Period 250.00 3/11/09 EVENT; OR-03 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
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)
League of Conservation Voters Action Fund

<p>A. Full Name (Last, First, Middle Initial) John Bocchieri for Congress</p> <p>Mailing Address PO Box 3016</p> <p>City Alliance State OH Zip Code 44601-7016</p> <p>Purpose of Disbursement 03/24/09 EVENT; OH-16 US SENATE</p> <p>Candidate Name JOHN A BOCCIERI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27115 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>03/24/09 EVENT; OH-16 US SENATE</p>
<p>B. Full Name (Last, First, Middle Initial) Friends Of Jim Clyburn</p> <p>Mailing Address PO Box 12567</p> <p>City Columbia State SC Zip Code 29211-2567</p> <p>Purpose of Disbursement 3/31/09 EVENT; SC-06 US HOUSE</p> <p>Candidate Name JAMES E CLYBURN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90320.E27060 Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/31/09 EVENT; SC-06 US HOUSE</p>
<p>C. Full Name (Last, First, Middle Initial) Gerry Connolly for Congress</p> <p>Mailing Address PO Box 563</p> <p>City Merrifield State VA Zip Code 22116-0563</p> <p>Purpose of Disbursement 03/24/09 EVENT; VA-11 US HOUSE</p> <p>Candidate Name GERRY CONNOLLY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27117 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>03/24/09 EVENT; VA-11 US HOUSE</p>

SUBTOTAL of Disbursements This Page (optional)	750.00
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 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)
League of Conservation Voters Action Fund

<p>A. Full Name (Last, First, Middle Initial) Kathy Dahlkemper for Congress</p> <p>Mailing Address 530 Seminole Dr</p> <p>City Erie State PA Zip Code 16505-2428</p> <p>Purpose of Disbursement 03/24/09 EVENT; PA-03 US HOUSE</p> <p>Candidate Name KATHLEEN ANN DAHLKEMPER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27118 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>03/24/09 EVENT; PA-03 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Driehaus for Congress</p> <p>Mailing Address 1018 Benz Ave</p> <p>City Cincinnati State OH Zip Code 45238-4406</p> <p>Purpose of Disbursement 3/17/09 EVENT; OH-01 US HOUSE</p> <p>Candidate Name STEVEN LEO DRIEHAUS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90320.E27064 Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/17/09 EVENT; OH-01 US HOUSE</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Dick Durbin Committee</p> <p>Mailing Address PO Box 1949</p> <p>City Springfield State IL Zip Code 62705-</p> <p>Purpose of Disbursement 3/4/09 EVENT; IL-US SENATE</p> <p>Candidate Name RICHARD J DURBIN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90309.E27007 Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/4/09 EVENT; IL-US SENATE</p>

SUBTOTAL of Disbursements This Page (optional) ►

750.00

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 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)
League of Conservation Voters Action Fund

<p>A. Full Name (Last, First, Middle Initial) Donna Edwards For Congress</p> <p>Mailing Address PO Box 441153</p> <p>City Fort Washington State MD Zip Code 20749-</p> <p>Purpose of Disbursement 3/23/09 EVENT; MD-04 US HOUSE</p> <p>Candidate Name DONNA EDWARDS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90320.E27062 Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/23/09 EVENT; MD-04 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) EDWARDS, DONNA</p> <p>Mailing Address 8904 Glen Lane</p> <p>City Fort Washington State MD Zip Code 20744</p> <p>Purpose of Disbursement EARMARK: GENE KARPINSKI</p> <p>Candidate Name DONNA EDWARDS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90320.E27056 Date of Disbursement 03 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>[MEMO ITEM] Earmarked - Donna Edwards - Transmitted by Original Check</p>
<p>C. Full Name (Last, First, Middle Initial) Bill Foster for Congress Comm</p> <p>Mailing Address PO Box 703</p> <p>City Geneva State IL Zip Code 60134-0703</p> <p>Purpose of Disbursement 3/24/09 EVENT; IL-14 US HOUSE</p> <p>Candidate Name G. WILLIAM FOSTER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27104 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/24/09 EVENT; IL-14 US HOUSE</p>

SUBTOTAL of Disbursements This Page (optional)	500.00
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 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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Franken Recount Fund	Transaction ID: 90415.E27184 Date of Disbursement 03 / 18 / 2009
	Mailing Address 4190 Vinewood Lane	Amount of Each Disbursement this Period 20.00
	City Minneapolis State MN Zip Code 55442	
	Purpose of Disbursement EARMARK: SUE ORLET	[MEMO ITEM] Earmarked - Al Franken - Transmitted by Original Check
	Candidate Name AL FRANKEN	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) RECOUNT 2008	

B.	Full Name (Last, First, Middle Initial) Friends Of Lois Capps	Transaction ID: 90309.E27004 Date of Disbursement 03 / 04 / 2009
	Mailing Address Po Box 23940	Amount of Each Disbursement this Period 250.00
	City Santa Barbara State CA Zip Code 93121-	
	Purpose of Disbursement 3/24/09 EVENT; CA-23 US HOUSE	3/24/09 EVENT; CA-23 US HOUSE
	Candidate Name LOIS G CAPPS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

C.	Full Name (Last, First, Middle Initial) Friends Of Schumer	Transaction ID: 90311.E27024 Date of Disbursement 03 / 10 / 2009
	Mailing Address 509 Madison Ave Rm 1902	Amount of Each Disbursement this Period 250.00
	City New York State NY Zip Code 10022-5523	
	Purpose of Disbursement 3/10/09 EVENT; NY-US SENATE	3/10/09 EVENT; NY-US SENA- TE
	Candidate Name CHARLES E SCHUMER	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	500.00
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)
League of Conservation Voters Action Fund

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Alan Grayson</p> <p>Mailing Address 8419 Oak Park Rd</p> <p>City Orlando State FL Zip Code 32819-3240</p> <p>Purpose of Disbursement 03/18/09 EVENT; FL-08 US HOUSE</p> <p>Candidate Name ALAN MARK GRAYSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90320.E27063</p> <p>Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>03/18/09 EVENT; FL-08 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Griffith for Congress</p> <p>Mailing Address PO Box 2916</p> <p>City Huntsville State AL Zip Code 35804-2916</p> <p>Purpose of Disbursement 3/24/09 EVENT; AL-05 US HOUSE</p> <p>Candidate Name R PARKER GRIFFITH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27106</p> <p>Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/24/09 EVENT; AL-05 US HOUSE</p>
<p>C. Full Name (Last, First, Middle Initial) Halvorson for Congress</p> <p>Mailing Address PO Box 176</p> <p>City Crete State IL Zip Code 60417-0176</p> <p>Purpose of Disbursement 3/24/09 EVENT; IL-11 US HOUSE</p> <p>Candidate Name DEBORAH DEBBIE HALVORSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27107</p> <p>Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/24/09 EVENT; IL-11 US HOUSE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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)
League of Conservation Voters Action Fund

A. Full Name (Last, First, Middle Initial) Martin Heinrich for Congress Mailing Address 2118 Central Ave SE # 71 City Albuquerque State NM Zip Code 87106-4004 Purpose of Disbursement 3/31/09 EVENT; NM-01 US HOUSE Candidate Name MARTIN HEINRICH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90320.E27061 Date of Disbursement 03 / 20 / 2009 Amount of Each Disbursement this Period 250.00 3/31/09 EVENT; NM-01 US HOUSE
	Category/ Type
B. Full Name (Last, First, Middle Initial) Hoosiers for Hill Mailing Address PO Box 1071 City Seymour State IN Zip Code 47274- Purpose of Disbursement 3/24/09 EVENT; IN-09 US HOUSE Candidate Name BARON P HILL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90309.E27012 Date of Disbursement 03 / 06 / 2009 Amount of Each Disbursement this Period 250.00 3/24/09 EVENT; IN-09 US HOUSE
	Category/ Type
C. Full Name (Last, First, Middle Initial) Paul Hodes for Congress Mailing Address 26 S Main St # 253 City Concord State NH Zip Code 03301-4809 Purpose of Disbursement NH-02 US HOUSE Candidate Name PAUL W HODES Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90327.E27149 Date of Disbursement 03 / 27 / 2009 Amount of Each Disbursement this Period 500.00 NH-02 US HOUSE
	Category/ Type

SUBTOTAL of Disbursements This Page (optional)	1000.00
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 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)
League of Conservation Voters Action Fund

A. Full Name (Last, First, Middle Initial) Hoyer For Congress <hr/> Mailing Address 7905 Malcolm Road Suite 102 <hr/> City Clinton State MD Zip Code 20735- <hr/> Purpose of Disbursement 3/24/09 EVENT; MD-05 US HOUSE Candidate Name STENY HAMILTON HOYER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90325.E27101 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	3/24/09 EVENT; MD-05 US HOUSE
B. Full Name (Last, First, Middle Initial) Adler for Congress <hr/> Mailing Address 14 Knightswood Dr <hr/> City Marlton State NJ Zip Code 08053-2522 <hr/> Purpose of Disbursement 3/24/09 EVENT; NJ-03 US HOUSE Candidate Name JOHN H ADLER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90325.E27113 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	3/24/09 EVENT; NJ-03 US HOUSE
C. Full Name (Last, First, Middle Initial) Kilroy For Congress <hr/> Mailing Address 550 E Walnut St Ste 305 <hr/> City Columbus State OH Zip Code 43215-5323 <hr/> Purpose of Disbursement 3/24/09 EVENT; OH-15 US HOUSE Candidate Name MARY JO KILROY <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90325.E27108 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	3/24/09 EVENT; OH-15 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
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 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)
League of Conservation Voters Action Fund

<p>A. Full Name (Last, First, Middle Initial) Kirkpatrick For Arizona</p> <p>Mailing Address PO Box 993</p> <p>City Prescott State AZ Zip Code 86302-0993</p> <p>Purpose of Disbursement 3/11/09 EVENT; AZ-01 US HOUSE</p> <p>Candidate Name ANN KIRKPATRICK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90309.E27010 Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/11/09 EVENT; AZ-01 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Gillibrand for Senate</p> <p>Mailing Address P.O. Box 15734</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement 03/24/09 EVENT; NY-20 US SENATE</p> <p>Candidate Name GILLIBRAND FOR SENATE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27121 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>03/24/09 EVENT; NY-20 US SENATE</p>
<p>C. Full Name (Last, First, Middle Initial) Kissell For Congress</p> <p>Mailing Address PO Box 1530</p> <p>City Biscoe State NC Zip Code 27209-1530</p> <p>Purpose of Disbursement 3/24/09 EVENT; NC-08 US HOUSE</p> <p>Candidate Name LARRY W KISSELL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27110 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/24/09 EVENT; NC-08 US HOUSE</p>

SUBTOTAL of Disbursements This Page (optional)	750.00
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 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)
League of Conservation Voters Action Fund

A. Full Name (Last, First, Middle Initial) Kosmas for Congress <hr/> Mailing Address PO Box 1547 <hr/> City New Smyrna Beach State FL Zip Code 32170-1547 Purpose of Disbursement 3/10/09 EVENT; FL-24 US HOUSE Candidate Name SUZANNE KOSMAS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 24	Transaction ID: 90309.E27011 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type 3/10/09 EVENT; FL-24 US HOUSE
B. Full Name (Last, First, Middle Initial) Kratovil for Congress <hr/> Mailing Address 222 Main Sail Dr <hr/> City Stevensville State MD Zip Code 21666-2542 Purpose of Disbursement 3/19/09 EVENT; MD-01 US HOUSE Candidate Name FRANK KRATOVIL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District: 01	Transaction ID: 90309.E27013 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type 3/19/09 EVENT; MD-01 US HOUSE
C. Full Name (Last, First, Middle Initial) Lance for Congress <hr/> Mailing Address PO Box 225 <hr/> City Colonia State NJ Zip Code 07067-0225 Purpose of Disbursement 3/11/09 EVENT; NJ-07 US HOUSE Candidate Name LEONARD LANCE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 07	Transaction ID: 90320.E27051 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type 3/11/09 EVENT; NJ-07 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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)
League of Conservation Voters Action Fund

A. Full Name (Last, First, Middle Initial) Markey for Congress Mailing Address PO Box 1333 City Fort Collins State CO Zip Code 80522-1333 Purpose of Disbursement 3/24/09 EVENT; CO-04 US HOUSE Candidate Name ELIZABETH HELEN MARKEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90325.E27111 Date of Disbursement 03 / 24 / 2009
	Amount of Each Disbursement this Period 250.00 3/24/09 EVENT; CO-04 US HOUSE

B. Full Name (Last, First, Middle Initial) Massa For Congress Mailing Address 60 E Market St Ste 244 City Corning State NY Zip Code 14830-2743 Purpose of Disbursement 3/24/09 EVENT; NY-29 US HOUSE Candidate Name ERIC J MASSA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90320.E27066 Date of Disbursement 03 / 20 / 2009
	Amount of Each Disbursement this Period 250.00 3/24/09 EVENT; NY-29 US HOUSE

C. Full Name (Last, First, Middle Initial) Michael McMahon for Congress Mailing Address 236 Massachusetts Ave NE Ste 602 Suite 602 City Washington State DC Zip Code 20002-4971 Purpose of Disbursement 3/3/09 EVENT; NY-13 US HOUSE Candidate Name MICHAEL E. MCMAHON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90309.E27008 Date of Disbursement 03 / 06 / 2009
	Amount of Each Disbursement this Period 250.00 3/3/09 EVENT; NY-13 US HO-USE

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
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 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)
League of Conservation Voters Action Fund

<p>A. Full Name (Last, First, Middle Initial) McNerney For Congress</p> <p>Mailing Address 6520 Village Parkway 2nd Flr</p> <p>City Dublin State CA Zip Code 94568-</p> <p>Purpose of Disbursement 3/24/09 EVENT; CA-11 US HOUSE</p> <p>Candidate Name JERRY MCNERNEY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27112 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/24/09 EVENT; CA-11 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Jeff Merkley for Oregon</p> <p>Mailing Address PO Box 29136</p> <p>City Portland State OR Zip Code 97296-9136</p> <p>Purpose of Disbursement 3/25/09 EVENT; OR-US SENATE</p> <p>Candidate Name JEFFREY ALAN MERKLEY</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90309.E27009 Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/25/09 EVENT; OR-US SENATE</p>
<p>C. Full Name (Last, First, Middle Initial) Minnick for Congress</p> <p>Mailing Address 8150 W Emerald St Ste 170 Suite 170</p> <p>City Boise State ID Zip Code 83704-9062</p> <p>Purpose of Disbursement 03/24/09 EVENT; ID-01 US HOUSE</p> <p>Candidate Name WALTER CLIFFORD MINNICK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90325.E27109 Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>03/24/09 EVENT; ID-01 US HOUSE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Friends of Glenn Nye	Transaction ID: 90325.E27102 Date of Disbursement 03 / 24 / 2009
	Mailing Address PO Box 68444	Amount of Each Disbursement this Period 250.00
	City Virginia Beach State VA Zip Code 23471-8444	
	Purpose of Disbursement 3/24/09 EVENT; VA-02 US HOUSE	Category/ Type
	Candidate Name GLENN CARLYLE NYE, III	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		3/24/09 EVENT; VA-02 US HOUSE

B.	Full Name (Last, First, Middle Initial) Friends of Jim Oberstar	Transaction ID: 90320.E27049 Date of Disbursement 03 / 17 / 2009
	Mailing Address 1017 8th St NE	Amount of Each Disbursement this Period 250.00
	City Washington State DC Zip Code 20002-3620	
	Purpose of Disbursement 3/25/09 EVENT; MN-08 US HOUSE	Category/ Type
	Candidate Name JAMES L OBERSTAR	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		3/25/09 EVENT; MN-08 US HOUSE

C.	Full Name (Last, First, Middle Initial) Nancy Pelosi for Congress	Transaction ID: 90325.E27119 Date of Disbursement 03 / 24 / 2009
	Mailing Address 235 Montgomery Street, Ste 610	Amount of Each Disbursement this Period 500.00
	City San Francisco State CA Zip Code 94104-	
	Purpose of Disbursement 3/31/09 EVENT; CA-08 US HOUSE	Category/ Type
	Candidate Name NANCY PELOSI	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		3/31/09 EVENT; CA-08 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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 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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Perriello for Congress	Transaction ID: 90320.E27065 Date of Disbursement 03 / 20 / 2009
	Mailing Address PO Box 306	Amount of Each Disbursement this Period 250.00
	City Ivy State VA Zip Code 22945-0306	
	Purpose of Disbursement 03/24/09 EVENT; VA-05 US HOUSE	Category/ Type
	Candidate Name THOMAS STUART PERRIELLO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		03/24/09 EVENT; VA-05 US HOUSE

B.	Full Name (Last, First, Middle Initial) Peters for Congress	Transaction ID: 90311.E27026 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO Box 226	Amount of Each Disbursement this Period 250.00
	City Bloomfield Hills State MI Zip Code 48303-0226	
	Purpose of Disbursement 3/19/09 EVENT; MI-09 US HOUSE	Category/ Type
	Candidate Name GARY PETERS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		3/19/09 EVENT; MI-09 US HOUSE

C.	Full Name (Last, First, Middle Initial) Quigley for Congress	Transaction ID: 90320.E27050 Date of Disbursement 03 / 17 / 2009
	Mailing Address 1244 W Eddy St	Amount of Each Disbursement this Period 250.00
	City Chicago State IL Zip Code 60657-1430	
	Purpose of Disbursement 3/18/09 EVENT; IL-05 US HOUSE	Category/ Type
	Candidate Name QUIGLEY FOR CONGRESS	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		3/18/09 EVENT; IL-05 US HOUSE

SUBTOTAL of Disbursements This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

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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)
League of Conservation Voters Action Fund

<p>A. Full Name (Last, First, Middle Initial) Schauer for Congress</p> <p>Mailing Address PO Box 100</p> <p>City Battle Creek State MI Zip Code 49016-0100</p> <p>Purpose of Disbursement 3/25/09 EVENT; MI-07 US HOUSE</p> <p>Candidate Name MARK HAMILTON SCHAUER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90309.E27005 Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/25/09 EVENT; MI-07 US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Kurt Schrader for Congress</p> <p>Mailing Address 607 N. Main St Ste 240</p> <p>City Oregon City State OR Zip Code 97045-1836</p> <p>Purpose of Disbursement 3/25/09 EVENT; OR-05 US HOUSE</p> <p>Candidate Name KURT SCHRADER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90320.E27058 Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/25/09 EVENT; OR-05 US HOUSE</p>
<p>C. Full Name (Last, First, Middle Initial) Jeanne Shaheen for Senate</p> <p>Mailing Address 426 C St NE</p> <p>City Washington State DC Zip Code 20002-5839</p> <p>Purpose of Disbursement 3/26/09 EVENT; NH-US SENATE</p> <p>Candidate Name JEANNE SHAHEEN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90320.E27059 Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>3/26/09 EVENT; NH-US SENATE</p>

SUBTOTAL of Disbursements This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

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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)
League of Conservation Voters Action Fund

A. Full Name (Last, First, Middle Initial) Harry Teague for Congress <hr/> Mailing Address PO Box 5153 <hr/> City Hobbs State NM Zip Code 88241-5153 <hr/> Purpose of Disbursement 3/24/09 EVENT; NM-02 US HOUSE Candidate Name HARRY TEAGUE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90325.E27103 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00 <hr/> 3/24/09 EVENT; NM-02 US HOUSE
B. Full Name (Last, First, Middle Initial) Dina Titus for Congress <hr/> Mailing Address 3711 E Sunset Rd Ste C5 Suite C5 <hr/> City Las Vegas State NV Zip Code 89120-6212 <hr/> Purpose of Disbursement 3/24/09 EVENT; NV-03 US HOUSE Candidate Name DINA TITUS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90325.E27105 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00 <hr/> 3/24/09 EVENT; NV-03 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

11750.00

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

Use separate schedule(s)
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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 checked="" 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)
League of Conservation Voters Action Fund

A.	Full Name (Last, First, Middle Initial) Georgene Pasarell	Transaction ID: 90415.E27201 Date of Disbursement
	Mailing Address 369B 3rd St., #234 #234	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City San Rafael State CA Zip Code 94901-	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of Contribution VOIDED CHK ORG RP Candidate Name	<input type="text" value="-500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="010"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Georgene Pasarell	Transaction ID: 90415.E27202 Date of Disbursement
	Mailing Address 369B 3rd St., #234 #234	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City San Rafael State CA Zip Code 94901-	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of Contribution RE-ISSUE OF REFUN Candidate Name	<input type="text" value="500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="010"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

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