

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Pennsylvania Democratic Party		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee	
If YES, name the designating committee:	Mailing Address	
	City	State      ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee <b>[MEMO ITEM]</b> Bob Casey For Pennsylvania Committee		Purpose of Expenditure Federal State & Unemployment Taxes <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>
Mailing Address 22 North Third Street		Date M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
City	State      ZIP Code Harrisburg      PA      17101	
Name of Federal Candidate Supported Bob Casey	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: PA District: _____
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">0.00</div>		Amount <div style="border: 1px solid black; width: 150px; text-align: center;">704.90</div>
<b>Transaction ID:</b> 25-17-00027-00052		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) of Each Payee <b>[MEMO ITEM]</b> Bob Casey For Pennsylvania Committee		Purpose of Expenditure Worker's Compensation <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>
Mailing Address 22 North Third Street		Date M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
City	State      ZIP Code Harrisburg      PA      17101	
Name of Federal Candidate Supported Bob Casey	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: PA District: _____
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">0.00</div>		Amount <div style="border: 1px solid black; width: 150px; text-align: center;">23.28</div>
<b>Transaction ID:</b> 25-17-00027-00053		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) of Each Payee Miller, Ellen E.		Purpose of Expenditure See Memo Items <div style="border: 1px solid black; width: 100px; height: 20px; float: right;">Category/Type</div>
Mailing Address 2311 North Front Street, Apt. 211		Date M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
City	State      ZIP Code Harrisburg      PA      17110	
Name of Federal Candidate Supported Bob Casey	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: PA District: _____
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; width: 150px; text-align: center;">2615.55</div>		Amount <div style="border: 1px solid black; width: 150px; text-align: center;">1803.37</div>
<b>Transaction ID:</b> 25-17-00032-0005		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<div style="border: 1px solid black; width: 150px; text-align: center;">1803.37</div>
<b>TOTAL</b> This Period (last page this line number only) .....	