

**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

HillPAC

ADDRESS (number and street)

1825 K Street NW

Suite 1000

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20006

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00363994

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

11

25

2008

through

12

31

2008

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

Allison Wright

Signature of Treasurer

Electronically Filed by Allison Wright

Date

01

31

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**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  
HILLPAC

Report Covering the Period:

From:

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

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		8534.51
(b) Cash on Hand at Beginning of Reporting Period .....	965501.05	
(c) Total Receipts (from Line 19) .....	164198.75	2935292.60
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1129699.80	2943827.11
7. Total Disbursements (from Line 31) .....	396822.47	2210949.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	732877.33	732877.33
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	34318.80	

☒ 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**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

HIIIPAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	152950.00	2542964.58
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	2202.75	165128.26
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	155152.75	2708092.84
(b) Political Party Committees .....	0.00	5000.00
(c) Other Political Committees (such as PACs) .....	9000.00	220250.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	164152.75	2933342.84
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) .....	46.00	1949.76
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
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)) .....	164198.75	2935292.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	164198.75	2935292.60

**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.....	396802.47	1761193.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	396802.47	1761193.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	444451.58
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 .....	20.00	5305.00
(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)) .....	20.00	5305.00
29. Other Disbursements.....	0.00	0.00
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))..	396822.47	2210949.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	396822.47	2210949.78

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	164152.75	2933342.84
34. Total Contribution Refunds (from Line 28(d)) .....	20.00	5305.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	164132.75	2928037.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	396802.47	1761193.20
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	46.00	1949.76
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	396756.47	1759243.44

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 6 / 141

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
HillPAC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mayfield Strategy Group

Nature of Debt (Purpose):  
Consulting/Website

Mailing Address 961 Ilima Way

City State ZIP Code  
Palo Alto CA 94306

Outstanding Balance Beginning This Period

55382.11

Transaction ID: SD-57

Amount Incurred This Period

28139.59

Payment This Period

55382.11

Outstanding Balance at Close of This Period

28139.59

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Soundpath Conferencing Svcs.

Nature of Debt (Purpose):  
Telephone Service

Mailing Address Post Office Box 33667

City State ZIP Code  
Washington DC 20033-3667

Outstanding Balance Beginning This Period

1394.57

Transaction ID: SD-58

Amount Incurred This Period

0.00

Payment This Period

1394.57

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Carefirst Bluecross Blueshield

Nature of Debt (Purpose):  
Employee Benefits

Mailing Address Post Office Box 79749

City State ZIP Code  
Baltimore MD 21279-0749

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD-59

Amount Incurred This Period

4449.94

Payment This Period

0.00

Outstanding Balance at Close of This Period

4449.94

1) **SUBTOTALS** This Period This Page (optional).....

32589.53

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 7 / 141

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
HillPAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NGP Software, Inc.Nature of Debt (Purpose):  
Consulting/ TechnologyMailing Address 1225 Eye Street, N.W.  
Suite 1225City State ZIP Code  
Washington DC 20005

Outstanding Balance Beginning This Period

750.00

Transaction ID: SD-60

Amount Incurred This Period

0.00

Payment This Period

750.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone Service

Mailing Address Post Office Box 660720

City State ZIP Code  
Dallas TX 75266

Outstanding Balance Beginning This Period

1086.76

Transaction ID: SD-61

Amount Incurred This Period

0.00

Payment This Period

1086.76

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Markham Group, LLCNature of Debt (Purpose):  
Consulting/ Trip PlanningMailing Address 823 West Markham Street  
Suite 202City State ZIP Code  
Little Rock AR 72201

Outstanding Balance Beginning This Period

666.67

Transaction ID: SD-62

Amount Incurred This Period

0.00

Payment This Period

666.67

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

0.00

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 8 / 141

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
HillPAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
S&B Public Solutions, LLCNature of Debt (Purpose):  
Consulting/ CommunicationsMailing Address 1000 Potomac Street, N.W.  
Suite 500City State ZIP Code  
Washington DC 20007

Outstanding Balance Beginning This Period

52.00

Transaction ID: SD-69

Amount Incurred This Period

0.00

Payment This Period

52.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AVF ConsultingNature of Debt (Purpose):  
Consulting/ AccountingMailing Address 1220-C East Joppa Road  
Suite 514City State ZIP Code  
Baltimore MD 21286

Outstanding Balance Beginning This Period

1080.00

Transaction ID: SD-64

Amount Incurred This Period

0.00

Payment This Period

1080.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
United Business TechnologiesNature of Debt (Purpose):  
Equipment

Mailing Address 9218 Gaither Road

City State ZIP Code  
Gaithersburg MD 20877

Outstanding Balance Beginning This Period

2139.15

Transaction ID: SD-65

Amount Incurred This Period

823.05

Payment This Period

2962.20

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 9 / 141

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
HillPAC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Comfort Inn

Nature of Debt (Purpose):  
Travel

Mailing Address 321 17th Street

City	State	ZIP Code
Denver	CO	80202

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD-66

Amount Incurred This Period

1729.27

Payment This Period

0.00

Outstanding Balance at Close of This Period

1729.27

1) **SUBTOTALS** This Period This Page (optional).....

1729.27

2) **TOTALS** This Period (last page this line number only).....

34318.80

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

34318.80

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

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

FOR LINE NUMBER: PAGE 10 / 141

(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)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Richard Alatorre

Mailing Address 5332 Argus Drive

City

Los Angeles

State

CA

Zip Code

90041

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: C68971

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Armando Arrona

Mailing Address 13823 Green Ranch Drive

City

Houston

State

TX

Zip Code

77039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
General Contractor

Occupation  
Builder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: C69003

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

David Barr

Mailing Address 528 Humboldt Street

City

Denver

State

CO

Zip Code

80218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: C68902

Amount of Each Receipt this Period

50.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

David Barr

Mailing Address 528 Humboldt Street

City

Denver

State

CO

Zip Code

80218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: C69006

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Norma Barreca

Mailing Address 1318 East Carson Street

City

Pittsburgh

State

PA

Zip Code

15203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C68953

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Harvey Beker

Mailing Address 4547 Livingston Avenue

City

Bronx

State

NY

Zip Code

10471

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Millburn Corporation

Occupation  
Investments

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 / 0 5 / 2 0 0 8

Transaction ID: C68883

Amount of Each Receipt this Period

5000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Jayne Beker

Mailing Address 4547 Livingston Avenue

City State Zip Code  
 Bronx NY 10471

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Psychologist

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 / 0 5 / 2 0 0 8

Transaction ID: C68882

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Diane BellRettger

Mailing Address 27 Harrington Road

City State Zip Code  
 Moraga CA 94556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 0 9 / 2 0 0 8

Transaction ID: C68961

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Jennifer Belmont

Mailing Address 3571 Pineview Court

City State Zip Code  
 Eden UT 84319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C68933

Amount of Each Receipt this Period

250.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Jennifer Belmont

Mailing Address 3571 Pineview Court

City

Eden

State

UT

Zip Code

84319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C68934

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Daniel Bendheim

Mailing Address 1275 Hastings Street

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phibro Animal Health

Occupation  
Vice President

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 / 1 7 / 2 0 0 8

Transaction ID: C68900

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Ethan I. Bendheim

Mailing Address 317 West 95th Street  
Apartment 1B

City

New York

State

NY

Zip Code

10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UBS

Occupation  
Investment Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C68873

Amount of Each Receipt this Period

5000.00

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

10250.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Gail Bendheim

Mailing Address 65 Challenger Road  
3rd Floor

City State Zip Code  
Ridgefield Park NJ 07660

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-employed

Occupation  
Psychologist

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 / 0 5 / 2 0 0 8

Transaction ID: C68874

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Jack C. Bendheim

Mailing Address 65 Challenger Road  
3rd Floor

City State Zip Code  
Ridgefield Park NJ 07660

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Phidro American Health Co-  
rporation

Occupation  
Executive

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 / 0 5 / 2 0 0 8

Transaction ID: C68875

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Sarah R. Bendheim

Mailing Address 317 West 95th Street  
Apartment 1B

City State Zip Code  
New York NY 10025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Renfrew Center

Occupation  
Psychologist

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 / 0 5 / 2 0 0 8

Transaction ID: C68876

Amount of Each Receipt this Period

5000.00

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

15000.00

**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 15 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Shifra Bendheim

Mailing Address 1275 Hastings Street

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Sinai School

Occupation

Social Worker

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 7 / 2 0 0 8

Transaction ID: C68901

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

George Bolatiwa

Mailing Address 16354 Flint Run Way

City

Sugar Land

State

TX

Zip Code

77498

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Group 1 Automotive

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68932

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Maria Bustillo

Mailing Address 6850 Southwest 115 Street

City

Miami

State

FL

Zip Code

33156-4779

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
S FL Inst for Rep Medici

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68977

Amount of Each Receipt this Period

250.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Diane Carlson

Mailing Address 2496 Old Beach Road

City

Wayzata

State

MN

Zip Code

55391

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation

Retired Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C68878

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Gerald Carlson

Mailing Address 3496 Old Beach Road

City

Wayzata

State

MN

Zip Code

55391

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pexibro Animal Health Corp

Occupation

CEO

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 / 0 5 / 2 0 0 8

Transaction ID: C68877

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Margaret Carmeli

Mailing Address 1 Kings Way

City

Freehold

State

NJ

Zip Code

07728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Carmeli, PC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C68879

Amount of Each Receipt this Period

5000.00

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

15000.00

**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 17 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Joyce Chang

Mailing Address 52 East End Avenue  
Apartment 31

City State Zip Code  
New York NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JPMorgan

Occupation  
Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68923

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Nikki Chantal

Mailing Address 13608 Fernbrook Court

City State Zip Code  
Centreville VA 20120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Friendly Systems

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.61

Date of Receipt

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

Transaction ID: C69018

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Linda Chock

Mailing Address 1512 Kalaepohaku Street

City State Zip Code  
Honolulu HI 96816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MITRE Corporation

Occupation  
Sr. Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68968

Amount of Each Receipt this Period

250.00

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

750.00

**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 18 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Robert James Cimas

Mailing Address 11601 Fallbrook Drive

City

Saint Louis

State

MO

Zip Code

63131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Capital Consultants

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: C68998

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

John Coburn

Mailing Address 99 Canal Center Plaza  
Suite 210

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VT Systems

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68930

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Colton

Mailing Address 1120 Southeast 9th Avenue

City

Pompano Beach

State

FL

Zip Code

33060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Broward County Public Sc

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68979

Amount of Each Receipt this Period

250.00

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

750.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 141

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Quarrier Cook

Mailing Address 1085 Camino Manana

City

Santa Fe

State

NM

Zip Code

87501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68945

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Sally Irvine Crow

Mailing Address 1143 Harrison Street

City

Denver

State

CO

Zip Code

80206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C68868

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Evan Dobelle

Mailing Address 180 Elm Street  
Suite 1, Box 233

City

Pittsfield

State

MA

Zip Code

01201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Westfield State College

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68920

Amount of Each Receipt this Period

250.00

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

750.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 141

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Carolyn Douglas

Mailing Address 345 East 84th Street  
Apartment 1

City State Zip Code  
New York NY 10028

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-employed

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: C69025

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Anita Drobny

Mailing Address 2005 Keats Lane

City State Zip Code  
Highland Park IL 60035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Nova M Radio

Occupation  
Chairwoman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68915

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Nancy Dunn

Mailing Address 5204 Antares Court

City State Zip Code  
Bakersfield CA 93306

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Not Employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68946

Amount of Each Receipt this Period

250.00

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

750.00

**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 21 / 141

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Tamar Eskin

Mailing Address 8209 Woburn Abbey Road

City

Glenn Dale

State

MD

Zip Code

20769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Conceptual Analytics LLC

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C68963

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Tamar Eskin

Mailing Address 8209 Woburn Abbey Road

City

Glenn Dale

State

MD

Zip Code

20769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Conceptual Analytics LLC

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C68964

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Irial Finan

Mailing Address 3230 Glen Arden Drive, Northwest

City

Atlanta

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coca Cola

Occupation

President/ Bottling Invest.

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 8 / 2 0 0 8

Transaction ID: C68893

Amount of Each Receipt this Period

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Glenda Fishman

Mailing Address 29 Fairmont Avenue

City

Newton

State

MA

Zip Code

02458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Facing History and Ourse

Occupation

Director of Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68921

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

John W. Fitzpatrick

Mailing Address 45 Bayview Court

City

Sag Harbor

State

NY

Zip Code

11963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fitzpatrick Hotel Group

Occupation

CEO

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 1 / 2 0 0 8

Transaction ID: C68889

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Wayne Flick

Mailing Address 553 North Cahuenga Boulevard

City

Los Angeles

State

CA

Zip Code

90004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Latham and Watkins

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

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

Transaction ID: C68928

Amount of Each Receipt this Period

250.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Tina Gandhi

Mailing Address 188 East 78th Street  
11B

City State Zip Code  
New York NY 10075

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

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  
1 2 / 0 8 / 2 0 0 8

Transaction ID: C68925

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Gregory Gilley

Mailing Address 222 Oriole Boulevard

City State Zip Code  
Duncanville TX 75116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Team Consultants Inc.

Occupation  
Lab Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: C68905

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Gregory Gilley

Mailing Address 222 Oriole Boulevard

City State Zip Code  
Duncanville TX 75116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Team Consultants Inc.

Occupation  
Lab Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: C69008

Amount of Each Receipt this Period

50.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Diana S. Goldin

Mailing Address 941 Park Avenue

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 9 / 2 0 0 8

Transaction ID: C69011

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Leith Greenslade

Mailing Address 103 EaStreet 86th Street  
5A

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
SAHM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C69023

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Anatole Gusakov

Mailing Address 13 70th Street

City

Brooklyn

State

NY

Zip Code

11209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
Not Employed

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 / 1 8 / 2 0 0 8

Transaction ID: C68894

Amount of Each Receipt this Period

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Tatyana Gusakov

Mailing Address 13 70th Street

City

Brooklyn

State

NY

Zip Code

11209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSI Inc.

Occupation

Computer Programmer

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 / 1 8 / 2 0 0 8

Transaction ID: C68895

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Sherry Haneckow

Mailing Address 472 Arcadia

City

Harbor Springs

State

MI

Zip Code

49740

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northern Michigan Region

Occupation

Healthcare Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68962

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Sarah Harkinson

Mailing Address 5109 Palomar Lane

City

Dallas

State

TX

Zip Code

75229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation

Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68972

Amount of Each Receipt this Period

250.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Lisa Henderson

Mailing Address 21 Edgewood Avenue

City

Mill Valley

State

CA

Zip Code

94941

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Infectious.com

Occupation  
CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68929

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Nelly Herrera

Mailing Address 5309 Backtrail Driveive

City

Austin

State

TX

Zip Code

78731

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Office of the Texas Atto

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68976

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Cheryl Hess

Mailing Address 550 Colusa Avenue

City

Berkeley

State

CA

Zip Code

94707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: C69017

Amount of Each Receipt this Period

250.00

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

750.00

**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 27 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Daphne Hildebolt

Mailing Address 48 Vanderbilt Avenue

City

Manhasset

State

NY

Zip Code

11030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Expo Communications Inc

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68914

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mark Holdbrooks

Mailing Address 67 Macarthur Avenue

City

Closter

State

NJ

Zip Code

07624

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68941

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Brian Jacobs

Mailing Address 701 Charnwood Drive

City

Wyckoff

State

NJ

Zip Code

07481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
Not Employed

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 / 1 1 / 2 0 0 8

Transaction ID: C68890

Amount of Each Receipt this Period

2500.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Peter Jacoby

Mailing Address 6203 Stoneham Lane

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT&T

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C68936

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Peter Jacoby

Mailing Address 6203 Stoneham Lane

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT&T

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C68938

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy Jameison

Mailing Address Post Office Box 833

City

Valley Stream

State

NY

Zip Code

11582-0833

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYC Department of Education

Occupation

High School Dean & Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68999

Amount of Each Receipt this Period

250.00

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

750.00

**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 29 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Richard Johnson

Mailing Address 7 West 96th Street  
Number 11C

City State Zip Code  
New York NY 10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phibro Animal Health Corp

Occupation  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C68884

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Josten

Mailing Address 801 Grand  
Suite 3900

City State Zip Code  
Des Moines IA 50309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dorsey & Whitney LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68937

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Jill Joyce

Mailing Address Post Office Box 1250

City State Zip Code  
Millersville MD 21108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Psychiatrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C68947

Amount of Each Receipt this Period

250.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Jane Kahan

Mailing Address 922 Madison Avenue

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Art Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C68960

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Nathan S. Kahn

Mailing Address 4663 Waldo Avenue

City

Bronx

State

NY

Zip Code

10471

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Empire Resources Inc.

Occupation  
Executive

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 / 0 5 / 2 0 0 8

Transaction ID: C68885

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Sandra Kahn

Mailing Address 4663 Waldo Avenue

City

Riverdale

State

NY

Zip Code

10471

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Empire Resources, Inc.

Occupation  
Executive

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 / 0 5 / 2 0 0 8

Transaction ID: C68880

Amount of Each Receipt this Period

5000.00

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

10250.00

**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 31 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Christian Karavolas

Mailing Address 38 East 57 Street  
3rd Floor

City State Zip Code  
New York NY 10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Romeo & Juliette Laser Ha-  
jr

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68913

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Alan Kaye

Mailing Address 23512 Collins Street

City State Zip Code  
Woodland Hills CA 91367

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
National Cervical Cancer

Occupation  
Chairman-volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68940

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Megan Keough

Mailing Address 6 Clark Lane

City State Zip Code  
Rye NY 10580-4136

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

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 / 1 8 / 2 0 0 8

Transaction ID: C68896

Amount of Each Receipt this Period

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Patrick J Keough

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
McCann-Erickson

Occupation  
Advertising Executive

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 / 0 5 / 2 0 0 8

Transaction ID: C69072

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Walt Kicinski

Mailing Address 530 East 90th Street  
5-K

City

State

Zip Code

New York

NY

10128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Not Employed

Occupation  
Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

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

Transaction ID: C68984

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Walt Kicinski

Mailing Address 530 East 90th Street  
5-K

City

State

Zip Code

New York

NY

10128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Not Employed

Occupation  
Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

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

Transaction ID: C68989

Amount of Each Receipt this Period

50.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Maryida Klimowicz

Mailing Address 1540 North Edgewood Street

City

Arlington

State

VA

Zip Code

22201-3944

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EmCare

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 7 / 2 0 0 8

Transaction ID: C68990

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Morton Landowne

Mailing Address 200 Riverside Boulevard

City

New York

State

NY

Zip Code

10069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nextbook

Occupation  
Executive

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 / 1 8 / 2 0 0 8

Transaction ID: C68891

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

F. Richard Leach

Mailing Address 5811 Irvington Boulevard

City

Houston

State

TX

Zip Code

77009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Leach&Minnick, P.C.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C68954

Amount of Each Receipt this Period

250.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Lesley Litzenberger

Mailing Address 315 Federal Street

City

Beaufort

State

SC

Zip Code

29902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68919

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Veronica Mcclaskey

Mailing Address 14905 Southeast Rivershore Drive

City

Vancouver

State

WA

Zip Code

98683

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

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  
1 2 / 0 8 / 2 0 0 8

Transaction ID: C68944

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

John McCormack

Mailing Address Post Office Box 581

City

Bedford

State

NY

Zip Code

10506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Bloodstock Consultant

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 / 1 1 / 2 0 0 8

Transaction ID: C68888

Amount of Each Receipt this Period

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Andrea McGuire

Mailing Address 100 37th Street

City

Des Moines

State

IA

Zip Code

50312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Enterprise

Occupation

Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 9 / 2 0 0 8

Transaction ID: C69012

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Bernadette Miller

Mailing Address 848 Wynnewood Road

City

Camp Hill

State

PA

Zip Code

17011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PA Dept. of Agriculture

Occupation

Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C68957

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Montgomery

Mailing Address 965 Fell Street

City

Baltimore

State

MD

Zip Code

21231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Johns Hopkins Hospital

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68991

Amount of Each Receipt this Period

250.00

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

750.00

**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 36 / 141

(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)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Belinda Munoz

Mailing Address Post Office Box 591204

City

San Francisco

State

CA

Zip Code

94159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Office of Susie & Mark Bu-  
ellOccupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: C68986

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Belinda Munoz

Mailing Address Post Office Box 591204

City

San Francisco

State

CA

Zip Code

94159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Office of Susie & Mark Bu-  
ellOccupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: C68987

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Belinda Munoz

Mailing Address Post Office Box 591204

City

San Francisco

State

CA

Zip Code

94159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Office of Susie & Mark Bu-  
ellOccupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: C68988

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

750.00

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 37 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Marsha Naify

Mailing Address 321 Redondo Avenue

City State Zip Code  
 Long Beach CA 90814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Liberty Road Tables LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: C68965

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Nelson

Mailing Address Post Office Box 1160

City State Zip Code  
 Chula Vista CA 91912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Businessman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: C68981

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Niall O'Dowd

Mailing Address 875 6th Avenue  
 Suite 2100

City State Zip Code  
 New York NY 10001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Irish Voice Newspaper

Occupation  
Publisher

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 / 0 5 / 2 0 0 8

Transaction ID: C68886

Amount of Each Receipt this Period

5000.00

**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: PAGE 38 / 141

(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)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Stella O'Leary

Mailing Address 3744 Oliver St, NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Irish American DemocratsOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C68887

Amount of Each Receipt this Period

4000.00

**B.**

Full Name (Last, First, Middle Initial)

Whitney Parker

Mailing Address 212 Beethoven Lane

City

Los Gatos

State

CA

Zip Code

95032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not EmployedOccupation  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	0	8

Transaction ID: C68959

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Jane Powell

Mailing Address 31 Cheever Circle

City

Andover

State

MA

Zip Code

01810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not EmployedOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	0	8

Transaction ID: C69019

Amount of Each Receipt this Period

250.00

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Mary Jane Powell

Mailing Address 31 Cheever Circle

City

Andover

State

MA

Zip Code

01810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C69020

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Melinda Roach

Mailing Address Post Office Box 12011

City

Arlington

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Department of State

Occupation  
Human Resources Speciali

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: C68943

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Annette Sanon

Mailing Address 451 Fulton Avenue  
Apartment 433

City

Hempstead

State

NY

Zip Code

11550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 8

Transaction ID: C68908

Amount of Each Receipt this Period

50.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Annette Sanon

Mailing Address 451 Fulton Avenue  
Apartment 433

City State Zip Code  
Hempstead NY 11550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C68951

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Sako Satka

Mailing Address 13405 Lake Avenue

City State Zip Code  
Lakewood OH 44107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
F.S. Enterprises LLC

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68992

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Philip Schaefer

Mailing Address 12 Peninsula Road

City State Zip Code  
Belvedere CA 94920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
World Pension Forum

Occupation  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 7 / 2 0 0 8

Transaction ID: C68899

Amount of Each Receipt this Period

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Daniel Segal

Mailing Address 424 East 52nd Street  
Number 4B

City State Zip Code  
New York NY 10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Prudential Douglas Ellim

Occupation  
Real Estate Exc.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68927

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Jessica Seinfeld

Mailing Address 211 Central Park West  
Apartment 19F

City State Zip Code  
New York NY 10024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Philanthropist

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 / 3 0 / 2 0 0 8

Transaction ID: C69070

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Edmund Sims

Mailing Address 690 White Pine Road

City State Zip Code  
Buffalo Grove IL 60089

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CDW

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C68996

Amount of Each Receipt this Period

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Edmund Sims

Mailing Address 690 White Pine Road

City

Buffalo Grove

State

IL

Zip Code

60089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CDW

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C68997

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Leonard Sippel

Mailing Address 96 Van Wies Point Road

City

Glenmont

State

NY

Zip Code

12077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 8

Transaction ID: C68983

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Karen Skidmore

Mailing Address 509 Hillcrest Circle

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68931

Amount of Each Receipt this Period

250.00

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

750.00

**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 43 / 141

(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)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Soloway

Mailing Address 755 Solana Drive

City

Lafayette

State

CA

Zip Code

94549

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	0	8

Transaction ID: C68952

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Linda Souza

Mailing Address 218 Ashton Avenue

City

San Francisco

State

CA

Zip Code

94112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

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
1	2	/	0	8	/	2	0	0	8

Transaction ID: C68942

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Josey Stamm

Mailing Address 209 Gribbel Road

City

Wyncote

State

PA

Zip Code

19095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Networkarts

Occupation

Artist/ Environmental Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68939

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

750.00

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 44 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Kjetil Stangeland

Mailing Address 510 Timber Terrace Road

City

Houston

State

TX

Zip Code

77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clarkson Shipping Service

Occupation  
Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68918

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Kathleen Fojtik Stroud

Mailing Address 2271 Placid Way

City

Ann Arbor

State

MI

Zip Code

48105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C68950

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Douglas Stroup

Mailing Address 295 Hemmer Road Post Office Box 65  
Post Office Box 654

City

Jeffersonville

State

NY

Zip Code

12748

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Euro RSCG Worldwide PR

Occupation  
Executive Vice President, Public Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C69022

Amount of Each Receipt this Period

250.00

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

750.00

**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 45 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Dolores Dee Tancredi

Mailing Address 8203 Brookside Road

City

Elkins Park

State

PA

Zip Code

19027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFT Pennsylvania

Occupation

Political Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 3 / 2 0 0 8

Transaction ID: C69004

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Bobby Thornburg

Mailing Address 5 Pritchard Court

City

Stafford

State

VA

Zip Code

22554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAT Inc

Occupation

Senior Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68924

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

George J. Tyler

Mailing Address 201 Holmes Mill Road

City

Cream Ridge

State

NJ

Zip Code

08514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tyler & Carmeli PC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C68881

Amount of Each Receipt this Period

5000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Ronald J Vingerelli

Mailing Address 10525 Somerset Boulevard  
33

City State Zip Code  
Bellflower CA 90706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Little Ceasars Pizza

Occupation  
Sign & Flyer Advertiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 9 / 2 0 0 8

Transaction ID: C69021

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mark Z. Weiss

Mailing Address 1325 Avenue of the Americas  
28th Floor

City State Zip Code  
New York NY 10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Arwen Properties

Occupation  
Executive

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 / 1 8 / 2 0 0 8

Transaction ID: C68892

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Gloria Williamson

Mailing Address 521 Holland Avenue

City State Zip Code  
Philadelphia MS 39350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
State

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68978

Amount of Each Receipt this Period

250.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

William Wood

Mailing Address 1000 Rio Grande

City

Austin

State

TX

Zip Code

78701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Silverton Partners

Occupation

Venture Capital

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68967

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Robert G. Yasi

Mailing Address 3672 Indian Way

City

San Diego

State

CA

Zip Code

92117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 9 / 2 0 0 8

Transaction ID: C69014

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Kathy Yiannoulis

Mailing Address 171 Thorne Street

City

Bridgeport

State

CT

Zip Code

06606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JMW Consultants

Occupation

Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C68966

Amount of Each Receipt this Period

250.00

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

750.00

**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 48 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Albert R. Moore

Mailing Address 5028 Country Club Place

City State Zip Code  
 El Paso TX 79922

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Verde Realty

Occupation  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C69050

Amount of Each Receipt this Period

-250.00

**[MEMO ITEM]**

\*

**B.**

Full Name (Last, First, Middle Initial)

Susan R. Moore

Mailing Address 5028 Country Clube Place

City State Zip Code  
 El Paso TX 79922

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Not Employed

Occupation  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C69051

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

\*

**C.**

Full Name (Last, First, Middle Initial)

Karen Hofmeister

Mailing Address 2121 Kirby Drive  
 Number 26NE

City State Zip Code  
 Houston TX 77019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-employed

Occupation  
Writer and Consultant

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 1 / 2 9 / 2 0 0 8

Transaction ID: C69052

Amount of Each Receipt this Period

-33.00

**[MEMO ITEM]**

\*

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

0.00

**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 49 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Donna Esteves

Mailing Address 77 Yacht Club Drive

City

Lk Hopatcong

State

NJ

Zip Code

07849

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SESCO, Inc.

Occupation

Energy conservation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: C69040A

Amount of Each Receipt this Period

100.00

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address Post Office Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.75

Date of Receipt

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

Transaction ID: C69040AB

Amount of Each Receipt this Period

100.00

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

Frank Jin

Mailing Address 6419 Morning Time Lane

City

Clarksville

State

MD

Zip Code

21029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Xin Sheng Seafood Inc

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 8

Transaction ID: C69055A

Amount of Each Receipt this Period

200.00

\* Earmarked Contribution:  
See Below

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 141

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address Post Office Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.75

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 8

Transaction ID: C69055AB

Amount of Each Receipt this Period

200.00

## **[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

0.00

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

152950.00

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

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

FOR LINE NUMBER: PAGE 51 / 141

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

21st Century Democratic Committee

Mailing Address 85 Crescent Beach Road

City

Glen Cove

State

NY

Zip Code

11542

FEC ID number of contributing  
federal political committee.

C

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 8 / 2 0 0 8

Transaction ID: C68898

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Friends of Carolyn McCarthy

Mailing Address 151 Linden Road

City

Mineola

State

NY

Zip Code

11501

FEC ID number of contributing  
federal political committee.

C

C00318931

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 Y  
1 2 / 3 0 / 2 0 0 8

Transaction ID: C69069

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Friends of Tom Suozzi

Mailing Address 410 Jericho TPKE  
Suite 303

City

Jericho

State

NY

Zip Code

FEC ID number of contributing  
federal political committee.

C

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 8 / 2 0 0 8

Transaction ID: C68897

Amount of Each Receipt this Period

1000.00

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

4000.00

**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 52 / 141

(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)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

Johnson &amp; Johnson PAC

Mailing Address One Johnson &amp; Johnson Plaza

City

New Brunswick

State

NJ

Zip Code

08933-7204

FEC ID number of contributing  
federal political committee.**C** C00010983

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		0	5		2	0	0	8

Transaction ID: C68870

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

5000.00

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

9000.00

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

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

FOR LINE NUMBER: PAGE 53 / 141

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HillPAC

**A.**

Full Name (Last, First, Middle Initial)

State of New Hampshire Unemployment Compensation

Mailing Address Post Office Box 2058

City

Concord

State

NH

Zip Code

03302-2058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

46.00

Date of Receipt

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

Transaction ID: C69065

Amount of Each Receipt this Period

46.00

Tax Refund

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

46.00

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

46.00

# **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)

PAGE 54 / 141

<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

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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> SB21B-946 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 15062	<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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Albany State NY Zip Code 12212-5062	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">21.51</td> </tr> </table>	21.51																			
21.51																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> SB21B-947 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 15062	<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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Albany State NY Zip Code 12212-5062	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">14.82</td> </tr> </table>	14.82																			
14.82																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) 1825 K Street Parking	<b>Transaction ID:</b> SB21B-948 <b>Date of Disbursement</b>																				
Mailing Address 1875 Eye Street, NW Suite 250	<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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
City Washington State DC Zip Code 20006	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel Candidate Name	<table border="1"> <tr> <td colspan="10">70.50</td> </tr> </table>	70.50																			
70.50																					
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) .....

106.83

**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 55 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mayfield Strategy Group	<b>Transaction ID:</b> SB21B-949 <b>Date of Disbursement</b>																				
Mailing Address 961 Ilima Way	<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>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	6		2	0	0	8												
City Palo Alto State CA Zip Code 94306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Email Expense Candidate Name	<table border="1"> <tr> <td colspan="10">34132.11</td> </tr> </table>	34132.11																			
34132.11																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Mayfield Strategy Group	<b>Transaction ID:</b> SB21B-950 <b>Date of Disbursement</b>																				
Mailing Address 961 Ilima Way	<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>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	6		2	0	0	8												
City Palo Alto State CA Zip Code 94306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting/Website Candidate Name	<table border="1"> <tr> <td colspan="10">7500.00</td> </tr> </table>	7500.00																			
7500.00																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mayfield Strategy Group	<b>Transaction ID:</b> SB21B-951 <b>Date of Disbursement</b>																				
Mailing Address 961 Ilima Way	<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>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	6		2	0	0	8												
City Palo Alto State CA Zip Code 94306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting/Website Candidate Name	<table border="1"> <tr> <td colspan="10">1250.00</td> </tr> </table>	1250.00																			
1250.00																					
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) .....

**42882.11**

**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)

PAGE 56 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mayfield Strategy Group	<b>Transaction ID:</b> SB21B-952 <b>Date of Disbursement</b>																				
Mailing Address 961 Ilima Way	<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>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	6		2	0	0	8												
City Palo Alto State CA Zip Code 94306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Website	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Mayfield Strategy Group	<b>Transaction ID:</b> SB21B-953 <b>Date of Disbursement</b>																				
Mailing Address 961 Ilima Way	<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>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	6		2	0	0	8												
City Palo Alto State CA Zip Code 94306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Website	<table border="1"> <tr> <td>7500.00</td> </tr> </table>	7500.00																			
7500.00																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> SB21B-1087 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 1270	<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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Newark State NJ Zip Code 07101	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Credit Card Process Fee	<table border="1"> <tr> <td>2252.75</td> </tr> </table>	2252.75																			
2252.75																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) .....

14752.75

**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 57 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 7450 Tilghman Street Suite 107</p> <p>City Allentown State PA Zip Code 18106</p> <p>Purpose of Disbursement Payroll Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1076</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="284.71"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Monica Jordan</p> <p>Mailing Address 19565 Black Olive Lane</p> <p>City Boca Raton State FL Zip Code 33498</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1202</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="413.84"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kelly Mehlenbacher</p> <p>Mailing Address 902 South Quincy Street</p> <p>City Arlington State VA Zip Code 22204</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1203</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="777.61"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1476.16**

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 58 / 141

<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)  
HillPAC**A.**

Full Name (Last, First, Middle Initial)

John Osterholt

Mailing Address 4740 Sarazen Drive

City  
HollywoodState  
FLZip Code  
33021Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-1204

Date of Disbursement

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

Amount of Each Disbursement this Period

818.09

**B.**

Full Name (Last, First, Middle Initial)

Nalinee Darmrong

Mailing Address 5511 Blair Road, NE

City  
WashingtonState  
DCZip Code  
20011Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-1205

Date of Disbursement

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

Amount of Each Disbursement this Period

900.99

**C.**

Full Name (Last, First, Middle Initial)

Stephanie Gent

Mailing Address 2000 N Street NW  
Apartment 801City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-1206

Date of Disbursement

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

Amount of Each Disbursement this Period

1049.52

SUBTOTAL of Disbursements This Page (optional) .....

2768.60

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 59 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Kathryn Balcerzak	<b>Transaction ID:</b> SB21B-1207 <b>Date of Disbursement</b>
Mailing Address 7303 Meadow Wood Way	<div> <div><small>M</small>1</div> <div><small>M</small>1</div> <div>/</div> <div><small>D</small>2</div> <div><small>D</small>8</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>0</div> <div><small>Y</small>8</div> </div>
City Clarksville State MD Zip Code 21029	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div>1108.74</div>
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) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Bryan Pagliano	<b>Transaction ID:</b> SB21B-1208 <b>Date of Disbursement</b>
Mailing Address 1601 Colonial Terrace	<div> <div><small>M</small>1</div> <div><small>M</small>1</div> <div>/</div> <div><small>D</small>2</div> <div><small>D</small>8</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>0</div> <div><small>Y</small>8</div> </div>
City Arlington State VA Zip Code 22209	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div>1745.32</div>
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) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Timothy Green	<b>Transaction ID:</b> SB21B-1209 <b>Date of Disbursement</b>
Mailing Address 1315 North Van Dorn Street	<div> <div><small>M</small>1</div> <div><small>M</small>1</div> <div>/</div> <div><small>D</small>2</div> <div><small>D</small>8</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>0</div> <div><small>Y</small>8</div> </div>
City Alexandria State VA Zip Code 22304	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div>1831.65</div>
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) .....

4685.71

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

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Allison Wright	<b>Transaction ID:</b> SB21B-1210 <b>Date of Disbursement</b>																				
Mailing Address 6208 32nd Place, 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>1</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Washington State DC Zip Code 20015	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2643.64</td> </tr> </table>	2643.64																			
2643.64																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Shelly Moskwa	<b>Transaction ID:</b> SB21B-1211 <b>Date of Disbursement</b>																				
Mailing Address 120 Grafton Street	<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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Chevy Chase State MD Zip Code 20815	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">4127.79</td> </tr> </table>	4127.79																			
4127.79																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jon Lovett	<b>Transaction ID:</b> SB21B-1212 <b>Date of Disbursement</b>																				
Mailing Address 1743 18th Street NW Basement	<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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">192.39</td> </tr> </table>	192.39																			
192.39																					
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) .....

6963.82

**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 61 / 141

<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

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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Lindsey Katherine Jack</p> <p>Mailing Address 2601 Woodley Place, N.W. Apartment 915</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1213 <b>Date of Disbursement</b>  <div> <div>11</div> <div>28</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>260.37</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Tamera Luzzatto</p> <p>Mailing Address 3014 32nd Street, N.W.</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1214 <b>Date of Disbursement</b>  <div> <div>11</div> <div>28</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>540.61</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Philippe Reines</p> <p>Mailing Address 1545 18th Street, N.W. Apartment 822</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1215 <b>Date of Disbursement</b>  <div> <div>11</div> <div>28</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>611.86</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1412.84**

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 62 / 141

<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)  
HillPAC**A.**

Full Name (Last, First, Middle Initial)

Ann Lewis

**Transaction ID:** SB21B-1216

Date of Disbursement

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

Mailing Address 4550 North Park Avenue  
#708

Amount of Each Disbursement this Period

City Chevy Chase State MD Zip Code 20815

623.14

Purpose of Disbursement  
Salary001  
Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

Robert Russo

**Transaction ID:** SB21B-1217

Date of Disbursement

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

Mailing Address 3 Washington Circle NW  
Apartment 105

Amount of Each Disbursement this Period

City Washington State DC Zip Code 20037

772.09

Purpose of Disbursement  
Salary001  
Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

Ali Rubin

**Transaction ID:** SB21B-1218

Date of Disbursement

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

Mailing Address 1515 O Street NW  
Apartment 305

Amount of Each Disbursement this Period

City Washington State DC Zip Code 20005

943.51

Purpose of Disbursement  
Salary001  
Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

2338.74

**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 63 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Huma Abedin</p> <p>Mailing Address 2020 12th Street, N.W. Number 709</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1219 <b>Date of Disbursement</b>  <div> <div>11</div> <div>28</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1376.27</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Caroline Adler</p> <p>Mailing Address 1021 North Garfield Street Apartment 444</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1220 <b>Date of Disbursement</b>  <div> <div>11</div> <div>28</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1384.62</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Emily Aden</p> <p>Mailing Address 1101 New Hampshire Avenue, NW Apartment 311</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1221 <b>Date of Disbursement</b>  <div> <div>11</div> <div>28</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1530.90</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**4291.79**

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

FEC Schedule B ( Form 3X) (Revised 02/2003)



# **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 65 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Kathleen Strand	<b>Transaction ID:</b> SB21B-1225 <b>Date of Disbursement</b>																				
Mailing Address 2222 West 113th Place	<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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Chicago State IL Zip Code 60643	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1767.19</td> </tr> </table>	1767.19																			
1767.19																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Maura Pally	<b>Transaction ID:</b> SB21B-1226 <b>Date of Disbursement</b>																				
Mailing Address 1757 Q Street, N.W. Apartment F	<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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1805.37</td> </tr> </table>	1805.37																			
1805.37																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Cheryl Mills	<b>Transaction ID:</b> SB21B-1227 <b>Date of Disbursement</b>																				
Mailing Address 29 Washington Square West Apartment 7-C	<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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City New York State NY Zip Code 10011	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
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) .....

6072.56

**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 66 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Capricia Marshall	<b>Transaction ID:</b> SB21B-1228 <b>Date of Disbursement</b>																				
Mailing Address 4703 Windom Place, N.W.	<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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Washington State DC Zip Code 20016	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2884.76</td> </tr> </table>	2884.76																			
2884.76																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Karen Persichili, Keogh	<b>Transaction ID:</b> SB21B-1229 <b>Date of Disbursement</b>																				
Mailing Address 1630 11th Avenue	<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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Brooklyn State NY Zip Code 11215	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">3187.18</td> </tr> </table>	3187.18																			
3187.18																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Diane Hamwi	<b>Transaction ID:</b> SB21B-1230 <b>Date of Disbursement</b>																				
Mailing Address 1218 9Th Street Apartment 2	<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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Santa Monica State CA Zip Code 90401	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
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) .....

9071.94

**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 67 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Ramirez	<b>Transaction ID:</b> SB21B-1231 <b>Date of Disbursement</b>
Mailing Address 20621 Tree Meadow	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 1 / 2 8 / 2 0 0 8</div> </div>
City San Antonio State TX Zip Code 78258	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div> <div>160.00</div> <div>001 Category/ Type</div> </div>
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) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Donna Camellia Meehan	<b>Transaction ID:</b> SB21B-1232 <b>Date of Disbursement</b>
Mailing Address 1682 North Quinn Street	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 1 / 2 8 / 2 0 0 8</div> </div>
City Arlington State VA Zip Code 22209	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div> <div>1036.14</div> <div>001 Category/ Type</div> </div>
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) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Abigail Eve Sugrue	<b>Transaction ID:</b> SB21B-1233 <b>Date of Disbursement</b>
Mailing Address 17 McGuinness Boulevard Apartment 3	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 1 / 2 8 / 2 0 0 8</div> </div>
City Brooklyn State NY Zip Code 11222	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div> <div>1218.66</div> <div>001 Category/ Type</div> </div>
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) .....

2414.80

**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)

PAGE 68 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Dennis Cheng</p> <p>Mailing Address 4 West 21st Street Apartment 7-A</p> <p>City New York State NY Zip Code 10010</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1234  <b>Date of Disbursement</b>  <div> <div>11</div> <div>28</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>2033.49</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Patrick Hallahan</p> <p>Mailing Address 2425 L Street, NW</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1235  <b>Date of Disbursement</b>  <div> <div>11</div> <div>28</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>3000.00</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kate Sokolov</p> <p>Mailing Address 2000 N Street NW Apartment 806</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1236  <b>Date of Disbursement</b>  <div> <div>11</div> <div>28</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>943.51</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**5977.00**

**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 69 / 141

<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)  
HillPAC

A.

Full Name (Last, First, Middle Initial)  
Kathleen Dowd

Mailing Address 1718 P Street NW  
Apartment 511

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1237  
Date of Disbursement

11 / 28 / 2008

Amount of Each Disbursement this Period

2128.43

B.

Full Name (Last, First, Middle Initial)  
Peter Daou

Mailing Address 400 Chambers Street  
Apartment 12D

City New York State NY Zip Code 10282

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1238  
Date of Disbursement

11 / 28 / 2008

Amount of Each Disbursement this Period

3750.00

C.

Full Name (Last, First, Middle Initial)  
Internal Revenue Service

Mailing Address Service Center

City Ogden State UT Zip Code 84201

Purpose of Disbursement  
Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1326  
Date of Disbursement

11 / 30 / 2008

Amount of Each Disbursement this Period

10170.70

SUBTOTAL of Disbursements This Page (optional) .....

16049.13

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

91.63

9638.18

1758.70

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 71 / 141

<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)  
HillPAC

A.

Full Name (Last, First, Middle Initial)  
Illinois Dept of Revenue

Mailing Address Post Office Box 19030

City Springfield State IL Zip Code 62794-9030

Purpose of Disbursement  
Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1338

Date of Disbursement

11 / 30 / 2008

Amount of Each Disbursement this Period

78.75

B.

Full Name (Last, First, Middle Initial)  
Comptroller of MD - WH Tax

Mailing Address Post Office Box 37272

City Baltimore State MD Zip Code 21297-3272

Purpose of Disbursement  
Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1340

Date of Disbursement

11 / 30 / 2008

Amount of Each Disbursement this Period

650.24

C.

Full Name (Last, First, Middle Initial)  
New York State Employment

Mailing Address Post Office Box 4119

City Binghamton State NY Zip Code 13902

Purpose of Disbursement  
Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1343

Date of Disbursement

11 / 30 / 2008

Amount of Each Disbursement this Period

546.95

SUBTOTAL of Disbursements This Page (optional) .....

1275.94

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 72 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	<b>Transaction ID:</b> SB21B-1346																				
Mailing Address Post Office Box 177	Date of Disbursement																				
City Richmond State VA Zip Code 23218	<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>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	0	8												
Purpose of Disbursement Taxes	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td colspan="10">438.80</td> </tr> </table>	438.80																			
438.80																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	001 Category/ Type																				
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) New York State Employment	<b>Transaction ID:</b> SB21B-1349																				
Mailing Address Post Office Box 4119	Date of Disbursement																				
City Binghamton State NY Zip Code 13902	<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>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	0	8												
Purpose of Disbursement Taxes	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td colspan="10">83.00</td> </tr> </table>	83.00																			
83.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	001 Category/ Type																				
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) New York State Employment	<b>Transaction ID:</b> SB21B-1352																				
Mailing Address Post Office Box 4119	Date of Disbursement																				
City Binghamton State NY Zip Code 13902	<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>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	0	8												
Purpose of Disbursement Taxes	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td colspan="10">277.59</td> </tr> </table>	277.59																			
277.59																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	001 Category/ Type																				
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

799.39

**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)

PAGE 73 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CyberSource</p> <p>Mailing Address 1295 Charleston Road</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Process Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1198</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1104.45"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Electronic Transaction Systems</p> <p>Mailing Address 10 Pidgeon Hill Drive</p> <p>City Sterling State VA Zip Code 20165</p> <p>Purpose of Disbursement Credit Card Process Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1201</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1260.27"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CyberSource</p> <p>Mailing Address 1295 Charleston Road</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Process Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1369</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="180.23"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2544.95**

**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 74 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Soundpath Conferencing Svcs.	<b>Transaction ID:</b> SB21B-1091 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 33667	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	8												
City Washington State DC Zip Code 20033-3667	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">1394.57</td> </tr> </table>	1394.57																			
1394.57																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Comcast	<b>Transaction ID:</b> SB21B-1092 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 3005	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	8												
City Southeastern State PA Zip Code 19398	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Subscription Candidate Name	<table border="1"> <tr> <td colspan="10">325.93</td> </tr> </table>	325.93																			
325.93																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) NGP Software, Inc.	<b>Transaction ID:</b> SB21B-1093 <b>Date of Disbursement</b>																				
Mailing Address 1225 Eye Street, N.W. Suite 1225	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	8												
City Washington State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting/ Technology Candidate Name	<table border="1"> <tr> <td colspan="10">750.00</td> </tr> </table>	750.00																			
750.00																					
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) .....

**2470.50**

**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)

PAGE 75 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address Post Office Box 660720	<b>Transaction ID:</b> SB21B-1094 <b>Date of Disbursement</b> <div> <div>12</div> <div>04</div> <div>2008</div> </div>
City Dallas State TX Zip Code 75266 Purpose of Disbursement Telephone Service 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) ▼	<b>Amount of Each Disbursement this Period</b> <div>1086.76</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Markham Group, LLC Mailing Address 823 West Markham Street Suite 202 City Little Rock State AR Zip Code 72201 Purpose of Disbursement Consulting/ Trip Planning 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) ▼	<b>Transaction ID:</b> SB21B-1095 <b>Date of Disbursement</b> <div> <div>12</div> <div>04</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>666.67</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address Post Office Box 15124 City Albany State NY Zip Code 12212-5124 Purpose of Disbursement Telephone Service 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) ▼	<b>Transaction ID:</b> SB21B-1096 <b>Date of Disbursement</b> <div> <div>12</div> <div>04</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>135.61</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

1889.04

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 76 / 141

<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)  
HillPAC**A.**Full Name (Last, First, Middle Initial)  
S&B Public Solutions, LLC**Transaction ID:** SB21B-1097

Date of Disbursement

Mailing Address 1000 Potomac Street, N.W.  
Suite 500

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	8

City Washington State DC Zip Code 20007

Amount of Each Disbursement this Period

Purpose of Disbursement  
Travel

002

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

52.00

**B.**Full Name (Last, First, Middle Initial)  
Labor Finders of Virginia, Inc**Transaction ID:** SB21B-1098

Date of Disbursement

Mailing Address Post Office Box 785

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	8

City Manassas Park State VA Zip Code 20113

Amount of Each Disbursement this Period

Purpose of Disbursement  
Moving Fees

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

159.84

**C.**Full Name (Last, First, Middle Initial)  
AVF Consulting**Transaction ID:** SB21B-1099

Date of Disbursement

Mailing Address 1220-C East Joppa Road  
Suite 514

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	8

City Baltimore State MD Zip Code 21286

Amount of Each Disbursement this Period

Purpose of Disbursement  
Consulting/ Accounting

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

1080.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1291.84

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPACFEC Schedule B (Form 3X) (Revised 02/2003)

# **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 78 / 141

<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)  
HILLPAC

**A.**

Full Name (Last, First, Middle Initial)  
United Business Technologies

Mailing Address 9218 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Equipment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1103

Date of Disbursement

12 / 04 / 2008

Amount of Each Disbursement this Period

1139.21

**B.**

Full Name (Last, First, Middle Initial)  
United Business Technologies

Mailing Address 9218 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Moving Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1104

Date of Disbursement

12 / 04 / 2008

Amount of Each Disbursement this Period

276.70

**C.**

Full Name (Last, First, Middle Initial)  
United Business Technologies

Mailing Address 9218 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Equipment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1105

Date of Disbursement

12 / 04 / 2008

Amount of Each Disbursement this Period

282.29

**SUBTOTAL** of Disbursements This Page (optional) .....

1698.20

**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 79 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) UPS	<b>Transaction ID:</b> SB21B-1106 <b>Date of Disbursement</b>																				
Mailing Address PO Box 7247-0244	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	8												
City Philadelphia State PA Zip Code 19170-0001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Shipping Candidate Name	<table border="1"> <tr> <td colspan="10">100.77</td> </tr> </table>	100.77																			
100.77																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) UPS	<b>Transaction ID:</b> SB21B-1107 <b>Date of Disbursement</b>																				
Mailing Address PO Box 7247-0244	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	8												
City Philadelphia State PA Zip Code 19170-0001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Shipping Candidate Name	<table border="1"> <tr> <td colspan="10">61.61</td> </tr> </table>	61.61																			
61.61																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) UPS	<b>Transaction ID:</b> SB21B-1108 <b>Date of Disbursement</b>																				
Mailing Address PO Box 7247-0244	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	8												
City Philadelphia State PA Zip Code 19170-0001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Shipping Candidate Name	<table border="1"> <tr> <td colspan="10">87.68</td> </tr> </table>	87.68																			
87.68																					
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) .....

250.06

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 80 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) UPS	<b>Transaction ID:</b> SB21B-1109 <b>Date of Disbursement</b>																				
Mailing Address PO Box 7247-0244	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	8												
City Philadelphia State PA Zip Code 19170-0001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Shipping Candidate Name	<table border="1"> <tr> <td>562.18</td> </tr> </table>	562.18																			
562.18																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) UPS	<b>Transaction ID:</b> SB21B-1110 <b>Date of Disbursement</b>																				
Mailing Address PO Box 7247-0244	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	8												
City Philadelphia State PA Zip Code 19170-0001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Shipping Candidate Name	<table border="1"> <tr> <td>72.24</td> </tr> </table>	72.24																			
72.24																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) NuTech Computer Solutions, Inc	<b>Transaction ID:</b> SB21B-1111 <b>Date of Disbursement</b>																				
Mailing Address 350 5th Avenue Suite 5806	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	8												
City New York State NY Zip Code 10118	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Software Candidate Name	<table border="1"> <tr> <td>45.16</td> </tr> </table>	45.16																			
45.16																					
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) .....

679.58

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



X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

147.03

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 82 / 141

<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)  
HillPAC

**A.** Full Name (Last, First, Middle Initial)  
Moritz Photography c/o Beatriz Mortiz

Mailing Address 1700 York Avenue  
Suite 4G

City State Zip Code  
New York NY 10128

Purpose of Disbursement  
Event Expense: Photography

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1115

Date of Disbursement

12 / 04 / 2008

Amount of Each Disbursement this Period

275.00

**B.** Full Name (Last, First, Middle Initial)  
Angelo's 677 Prime

Mailing Address 677 Broadway

City State Zip Code  
Albany NY 12207

Purpose of Disbursement  
Event Expense: Catering/Venue

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1116

Date of Disbursement

12 / 04 / 2008

Amount of Each Disbursement this Period

449.61

**C.** Full Name (Last, First, Middle Initial)  
Jack H Lucky Design

Mailing Address 750 Sundance Mountain

City State Zip Code  
New Market VA 22844

Purpose of Disbursement  
Event Expense: Decorations

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1117

Date of Disbursement

12 / 04 / 2008

Amount of Each Disbursement this Period

370.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1094.61

**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 83 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Ambrosia</p> <p>Mailing Address 23852 Pacific Coast Highway Suite 779</p> <p>City Malibu State CA Zip Code 90265</p> <p>Purpose of Disbursement Event Expense: Catering/Venue</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1118</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5045.53"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Canvas Systems</p> <p>Mailing Address 3025 Northwoods Parkway</p> <p>City Norcross State GA Zip Code 300</p> <p>Purpose of Disbursement Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1119</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="91.97"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Dennis Cheng</p> <p>Mailing Address 4 West 21st Street Apartment 7-A</p> <p>City New York State NY Zip Code 10010</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1120</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="111.69"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**5249.19**

**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 84 / 141

<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)  
HILLPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Dennis Cheng</p> <p>Mailing Address 4 West 21st Street Apartment 7-A</p> <p>City New York State NY Zip Code 10010</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1121</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="313.35"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Dennis Cheng</p> <p>Mailing Address 4 West 21st Street Apartment 7-A</p> <p>City New York State NY Zip Code 10010</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1122</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.20"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Jefferson Street Strateg., LLC</p> <p>Mailing Address 428 Jefferson Street, N.W.</p> <p>City Washington State DC Zip Code 20011</p> <p>Purpose of Disbursement Consulting/Website</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1123</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1843.55**

**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)

PAGE 85 / 141

<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

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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address PO Box 6463	<b>Transaction ID:</b> SB21B-1124 <b>Date of Disbursement</b> <div> <div>12</div> <div>04</div> <div>2008</div> </div>
City State Zip Code Carol Stream IL 60197-6463 Purpose of Disbursement Telephone Service Candidate Name <div> <div>001</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>6628.06</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc. Mailing Address P.O. Box 390728 City State Zip Code Cambridge MA 02139 Purpose of Disbursement Credit Card Process Fee Candidate Name <div> <div>101</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-1355 <b>Date of Disbursement</b> <div> <div>12</div> <div>05</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>7.69</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Mantz Advisory Group, LLC Mailing Address 7131 Arlington Road Apartment 445 City State Zip Code Bethesda MD 20814 Purpose of Disbursement Consulting/ Fundraising Candidate Name <div> <div>003</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-1125 <b>Date of Disbursement</b> <div> <div>12</div> <div>08</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5000.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**11635.75**

**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 86 / 141

<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

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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Peppers @ Uptown	<b>Transaction ID:</b> SB21B-1126 <b>Date of Disbursement</b>																				
Mailing Address 4620 North 10th Street	<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>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City McAllen State TX Zip Code 78504	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Event Expense: Catering/Venue Candidate Name	<table border="1"> <tr> <td colspan="10">2448.29</td> </tr> </table>	2448.29																			
2448.29																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ryan, Phillips, Utrecht & MacKinnon	<b>Transaction ID:</b> SB21B-1127 <b>Date of Disbursement</b>																				
Mailing Address 1133 Connecticut Ave., N.W. Suite 300	<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>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City Washington State DC Zip Code 20036	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting/Legal Candidate Name	<table border="1"> <tr> <td colspan="10">5043.34</td> </tr> </table>	5043.34																			
5043.34																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) PingTone Communications	<b>Transaction ID:</b> SB21B-1128 <b>Date of Disbursement</b>																				
Mailing Address 13921 Park Center Road 1st Floor	<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>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	8												
City Herndon State VA Zip Code 20171	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">3576.60</td> </tr> </table>	3576.60																			
3576.60																					
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) .....

**11068.23**

**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 87 / 141

<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)  
HillPAC

**A.**

Full Name (Last, First, Middle Initial)  
Iron Mountain

Mailing Address Post Office Box 27128

City State Zip Code  
New York NY 10087

Purpose of Disbursement  
Software

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1129

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

360.00

**B.**

Full Name (Last, First, Middle Initial)  
Iron Mountain

Mailing Address Post Office Box 27128

City State Zip Code  
New York NY 10087

Purpose of Disbursement  
Software

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1130

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

360.00

**C.**

Full Name (Last, First, Middle Initial)  
AccuConference by TalkPath LLC

Mailing Address Post Office Box 98607  
Dept 2029

City State Zip Code  
Las Vegas NV 89193-8607

Purpose of Disbursement  
Telephone Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1131

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

2.02

**SUBTOTAL** of Disbursements This Page (optional) .....

722.02

**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 88 / 141

<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)  
HillPAC

**A.**

Full Name (Last, First, Middle Initial)  
AccuConference by TalkPath LLC

Mailing Address Post Office Box 98607  
Dept 2029

City Las Vegas State NV Zip Code 89193-8607

Purpose of Disbursement  
Telephone Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-1132

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

114.62

**B.**

Full Name (Last, First, Middle Initial)  
AccuConference by TalkPath LLC

Mailing Address Post Office Box 98607  
Dept 2029

City Las Vegas State NV Zip Code 89193-8607

Purpose of Disbursement  
Telephone Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-1133

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

30.01

**C.**

Full Name (Last, First, Middle Initial)  
AccuConference by TalkPath LLC

Mailing Address Post Office Box 98607  
Dept 2029

City Las Vegas State NV Zip Code 89193-8607

Purpose of Disbursement  
Telephone Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-1134

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

8.39

**SUBTOTAL** of Disbursements This Page (optional) .....

153.02

**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 89 / 141

<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)  
HillPAC

**A.**

Full Name (Last, First, Middle Initial)  
National Treasure Shop c/o Eric Woodard

Mailing Address 2100 M Street, NW  
#170-267

City Washington State DC Zip Code 20037

Purpose of Disbursement  
Consulting/ Operations

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-1135

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Intention Media

Mailing Address 137 Smith Street

City Brooklyn State NY Zip Code 11021

Purpose of Disbursement  
Website

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-1136

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

1750.00

**C.**

Full Name (Last, First, Middle Initial)  
UPS

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-1137

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

48.48

**SUBTOTAL** of Disbursements This Page (optional) ►

4298.48

**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 90 / 141

<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)  
HillPAC

**A.**

Full Name (Last, First, Middle Initial)  
UPS

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1138

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

66.75

**B.**

Full Name (Last, First, Middle Initial)  
UPS

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1139

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

102.15

**C.**

Full Name (Last, First, Middle Initial)  
US21 Global Services

Mailing Address 2721 Prosperity Avenue  
Suite # 300

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1140

Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

592.99

**SUBTOTAL** of Disbursements This Page (optional) .....

761.89

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

FEC Schedule B ( Form 3X) (Revised 02/2003)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

FEC Schedule B (Form 3X) (Revised 02/2003)

# **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 93 / 141

<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)  
HILLPAC

**A.**

Full Name (Last, First, Middle Initial)  
Emily Aden

**Transaction ID:** SB21B-1142

Date of Disbursement

/   /

Mailing Address 1101 New Hampshire Avenue, NW  
Apartment 311

Amount of Each Disbursement this Period

City Washington State DC Zip Code 20037

Purpose of Disbursement  
Salary

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Internal Revenue Service

**Transaction ID:** SB21B-1327

Date of Disbursement

/   /

Mailing Address Service Center

Amount of Each Disbursement this Period

City Ogden State UT Zip Code 84201

Purpose of Disbursement  
Taxes

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
DC Office Of Tax and Revenue

**Transaction ID:** SB21B-1336

Date of Disbursement

/   /

Mailing Address Post Office Box 7792  
Ben Franklin Station

Amount of Each Disbursement this Period

City Washington State DC Zip Code 20044

Purpose of Disbursement  
Taxes

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

**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 94 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Illinois Dept of Revenue	<b>Transaction ID:</b> SB21B-1339 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 19030	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Springfield State IL Zip Code 62794-9030	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td>78.75</td> </tr> </table>	78.75																			
78.75																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Comptroller of MD - WH Tax	<b>Transaction ID:</b> SB21B-1341 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 37272	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Baltimore State MD Zip Code 21297-3272	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td>650.24</td> </tr> </table>	650.24																			
650.24																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) New York State Employment	<b>Transaction ID:</b> SB21B-1344 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 4119	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Binghamton State NY Zip Code 13902	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td>546.95</td> </tr> </table>	546.95																			
546.95																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) .....

1275.94

**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 95 / 141

<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

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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	<b>Transaction ID:</b> SB21B-1347 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 177	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Richmond State VA Zip Code 23218	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">453.11</td> </tr> </table>	453.11																			
453.11																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) New York State Employment	<b>Transaction ID:</b> SB21B-1350 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 4119	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Binghamton State NY Zip Code 13902	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	25.00																			
25.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) New York State Employment	<b>Transaction ID:</b> SB21B-1353 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 4119	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Binghamton State NY Zip Code 13902	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">277.59</td> </tr> </table>	277.59																			
277.59																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) .....

755.70

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

FEC Schedule B ( Form 3X) (Revised 02/2003)



# **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 97 / 141

<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)  
HillPAC

**A.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address Post Office Box 1270

City State Zip Code  
Newark NJ 07101

Purpose of Disbursement  
Credit Card Pymt: Items Below

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1324

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

7.49

See Attached Memo Entry

**B.**

Full Name (Last, First, Middle Initial)

UPS

Mailing Address 55 Glenlake Parkway NE

City State Zip Code  
Atlanta GA 30328

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1324-10000

Date of Disbursement

11 / 01 / 2008

Amount of Each Disbursement this Period

7.49

**[MEMO ITEM]**

Memo Entry

**C.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address Post Office Box 1270

City State Zip Code  
Newark NJ 07101

Purpose of Disbursement  
Credit Card Pymt: Items Below

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1325

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

20.10

See Attached Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

27.59

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 98 / 141

<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)  
HillPAC**A.**Full Name (Last, First, Middle Initial)  
New York Times

Mailing Address 229 W 43rd St

City New York State NY Zip Code 10036-3913

Purpose of Disbursement  
Subscription  
Candidate Name001  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
Other (specify) ▼  
State: District:Transaction ID: SB21B-1325-10000  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Amount of Each Disbursement this Period

20.10

**[MEMO ITEM]**  
Memo Entry**B.**Full Name (Last, First, Middle Initial)  
Jon LovettMailing Address 1743 18th Street NW  
Basement

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Salary  
Candidate Name001  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
Other (specify) ▼  
State: District:Transaction ID: SB21B-1257  
Date of Disbursement

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

Amount of Each Disbursement this Period

192.39

**C.**Full Name (Last, First, Middle Initial)  
Lindsey Katherine JackMailing Address 2601 Woodley Place, N.W.  
Apartment 915

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Salary  
Candidate Name001  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
Other (specify) ▼  
State: District:Transaction ID: SB21B-1258  
Date of Disbursement

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

Amount of Each Disbursement this Period

260.37

SUBTOTAL of Disbursements This Page (optional) .....

452.76

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)

PAGE 99 / 141

<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)  
HillPAC

**A.**

Full Name (Last, First, Middle Initial)  
Monica Jordan

Mailing Address 19565 Black Olive Lane

City Boca Raton State FL Zip Code 33498

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1259

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

413.84

**B.**

Full Name (Last, First, Middle Initial)  
Tamera Luzzatto

Mailing Address 3014 32nd Street, N.W.

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1260

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

540.61

**C.**

Full Name (Last, First, Middle Initial)  
Philippe Reines

Mailing Address 1545 18th Street, N.W.  
Apartment 822

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1261

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

611.86

**SUBTOTAL** of Disbursements This Page (optional) .....

1566.31

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 100 / 141

<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)  
HillPAC**A.**

Full Name (Last, First, Middle Initial)

Ann Lewis

**Transaction ID:** SB21B-1262

Date of Disbursement

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

Mailing Address 4550 North Park Avenue  
#708

Amount of Each Disbursement this Period

6	2	3	.	1	4
---	---	---	---	---	---

City Chevy Chase State MD Zip Code 20815

Purpose of Disbursement  
Salary

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

Robert Russo

**Transaction ID:** SB21B-1263

Date of Disbursement

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

Mailing Address 3 Washington Circle NW  
Apartment 105

Amount of Each Disbursement this Period

7	7	2	.	0	9
---	---	---	---	---	---

City Washington State DC Zip Code 20037

Purpose of Disbursement  
Salary

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

Kelly Mehlenbacher

**Transaction ID:** SB21B-1264

Date of Disbursement

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

Mailing Address 902 South Quincy Street

Amount of Each Disbursement this Period

7	7	7	.	6	1
---	---	---	---	---	---

City Arlington State VA Zip Code 22204

Purpose of Disbursement  
Salary

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

2172.84

**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)

PAGE 101 / 141

<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)  
HillPAC

A.

Full Name (Last, First, Middle Initial)  
John Osterholt

Mailing Address 4740 Sarazen Drive

City Hollywood State FL Zip Code 33021

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1265

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

818.09

B.

Full Name (Last, First, Middle Initial)  
Nalinee Darmrong

Mailing Address 5511 Blair Road, NE

City Washington State DC Zip Code 20011

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1266

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

900.99

C.

Full Name (Last, First, Middle Initial)  
Ali Rubin

Mailing Address 1515 O Street NW  
Apartment 305

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1267

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

983.71

SUBTOTAL of Disbursements This Page (optional) .....

2702.79

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

State:  District:

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 103 / 141

<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)  
HillPAC

**A.**

Full Name (Last, First, Middle Initial)  
Kathryn Balcerzak

Mailing Address 7303 Meadow Wood Way

City State Zip Code  
Clarksville MD 21029

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1271

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

1108.74

**B.**

Full Name (Last, First, Middle Initial)  
Abigail Eve Sugrue

Mailing Address 17 McGuinness Boulevard  
Apartment 3

City State Zip Code  
Brooklyn NY 11222

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1272

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

1218.66

**C.**

Full Name (Last, First, Middle Initial)  
Huma Abedin

Mailing Address 2020 12th Street, N.W.  
Number 709

City State Zip Code  
Washington DC 20009

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1273

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

1376.27

**SUBTOTAL** of Disbursements This Page (optional) .....

3703.67

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

State:  District:

FEC Schedule B ( Form 3X) (Revised 02/2003)



# **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 105 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Laura Pena	<b>Transaction ID:</b> SB21B-1277 <b>Date of Disbursement</b>
Mailing Address 125 Old Alice Road	<div> <div>12</div> <div>15</div> <div>2008</div> </div>
City Brownsville State TX Zip Code 78552	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div>1752.52</div>
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) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Kathleen Strand	<b>Transaction ID:</b> SB21B-1278 <b>Date of Disbursement</b>
Mailing Address 2222 West 113th Place	<div> <div>12</div> <div>15</div> <div>2008</div> </div>
City Chicago State IL Zip Code 60643	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div>1767.19</div>
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) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Maura Pally	<b>Transaction ID:</b> SB21B-1279 <b>Date of Disbursement</b>
Mailing Address 1757 Q Street, N.W. Apartment F	<div> <div>12</div> <div>15</div> <div>2008</div> </div>
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div>1805.37</div>
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) .....

**5325.08**

**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 106 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Bryan Pagliano	<b>Transaction ID:</b> SB21B-1280 <b>Date of Disbursement</b>																				
Mailing Address 1601 Colonial Terrace	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Arlington State VA Zip Code 22209	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1828.16</td> </tr> </table>	1828.16																			
1828.16																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Timothy Green	<b>Transaction ID:</b> SB21B-1281 <b>Date of Disbursement</b>																				
Mailing Address 1315 North Van Dorn Street	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Alexandria State VA Zip Code 22304	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1866.85</td> </tr> </table>	1866.85																			
1866.85																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Dennis Cheng	<b>Transaction ID:</b> SB21B-1282 <b>Date of Disbursement</b>																				
Mailing Address 4 West 21st Street Apartment 7-A	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City New York State NY Zip Code 10010	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2033.49</td> </tr> </table>	2033.49																			
2033.49																					
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) .....

**5728.50**

**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)

PAGE 107 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Kathleen Dowd</p> <p>Mailing Address 1718 P Street NW Apartment 511</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1283</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>2161.92</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Allison Wright</p> <p>Mailing Address 6208 32nd Place, NW</p> <p>City Washington State DC Zip Code 20015</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1284</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>2643.64</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Capricia Marshall</p> <p>Mailing Address 4703 Windom Place, N.W.</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1285</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>2978.52</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**7784.08**

**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 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Karen Persichili, Keogh	<b>Transaction ID:</b> SB21B-1286 <b>Date of Disbursement</b>																				
Mailing Address 1630 11th Avenue	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Brooklyn State NY Zip Code 11215	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">3187.18</td> </tr> </table>	3187.18																			
3187.18																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Shelly Moskwa	<b>Transaction ID:</b> SB21B-1287 <b>Date of Disbursement</b>																				
Mailing Address 120 Grafton Street	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
City Chevy Chase State MD Zip Code 20815	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">4127.79</td> </tr> </table>	4127.79																			
4127.79																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) United Business Technologies	<b>Transaction ID:</b> SB21B-1143 <b>Date of Disbursement</b>																				
Mailing Address 9218 Gaither Road	<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>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	6		2	0	0	8												
City Gaithersburg State MD Zip Code 20877	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Printing Candidate Name	<table border="1"> <tr> <td colspan="10">177.37</td> </tr> </table>	177.37																			
177.37																					
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) .....

**7492.34**

**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 / 141

<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)  
HillPAC

**A.**

Full Name (Last, First, Middle Initial)  
United Business Technologies

Mailing Address 9218 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Printing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1144

Date of Disbursement

12 / 16 / 2008

Amount of Each Disbursement this Period

15.27

**B.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address Post Office Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Pymt: Items Below

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1322

Date of Disbursement

12 / 16 / 2008

Amount of Each Disbursement this Period

889.44

See Attached Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Americar

Mailing Address 622 West 37th Street

City New York State NY Zip Code 10018

Purpose of Disbursement  
Travel

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1322-10000

Date of Disbursement

11 / 07 / 2008

Amount of Each Disbursement this Period

103.02

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

904.71

**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

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 141

<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)  
HillPAC

**A.**

Full Name (Last, First, Middle Initial)  
Americar

Mailing Address 622 West 37th Street

City State Zip Code  
New York NY 10018

Purpose of Disbursement  
Travel

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1322-20000  
Date of Disbursement

11 / 07 / 2008

Amount of Each Disbursement this Period

113.73

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
Americar

Mailing Address 622 West 37th Street

City State Zip Code  
New York NY 10018

Purpose of Disbursement  
Travel

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1322-30000  
Date of Disbursement

11 / 07 / 2008

Amount of Each Disbursement this Period

155.04

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Americar

Mailing Address 622 West 37th Street

City State Zip Code  
New York NY 10018

Purpose of Disbursement  
Travel

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1322-40000  
Date of Disbursement

11 / 07 / 2008

Amount of Each Disbursement this Period

189.21

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**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 111 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Americar Mailing Address 622 West 37th Street	<b>Transaction ID:</b> SB21B-1322-50000 <b>Date of Disbursement</b> <div> <div>11</div> <div>07</div> <div>2008</div> </div>
City New York State NY Zip Code 10018 Purpose of Disbursement Travel 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) ▼	<b>Amount of Each Disbursement this Period</b> <div>177.48</div> <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b> Full Name (Last, First, Middle Initial) Americar Mailing Address 622 West 37th Street City New York State NY Zip Code 10018 Purpose of Disbursement Travel 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) ▼	<b>Transaction ID:</b> SB21B-1322-60000 <b>Date of Disbursement</b> <div> <div>10</div> <div>22</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>150.96</div> <b>[MEMO ITEM]</b> Memo Entry
<b>C.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address Post Office Box 1270 City Newark State NJ Zip Code 07101 Purpose of Disbursement Credit Card Pymt: Items 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) ▼	<b>Transaction ID:</b> SB21B-1323 <b>Date of Disbursement</b> <div> <div>12</div> <div>16</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>159.73</div> See Attached Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

159.73

**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 112 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> SB21B-1323-10000 <b>Date of Disbursement</b>																				
Mailing Address 910 North Glebe Road	<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>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Arlington State VA Zip Code 22203	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Office Supplies	<table border="1"> <tr> <td>159.73</td> </tr> </table>	159.73																			
159.73																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Memo Entry																				
<b>B.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc.	<b>Transaction ID:</b> SB21B-1357 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 390728	<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>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	8		2	0	0	8												
City Cambridge State MA Zip Code 02139	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Credit Card Process Fee	<table border="1"> <tr> <td>13.87</td> </tr> </table>	13.87																			
13.87																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Susanne Bachtel	<b>Transaction ID:</b> SB21B-1145 <b>Date of Disbursement</b>																				
Mailing Address 4505 15th Street, N	<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>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	8		2	0	0	8												
City Arlington State VA Zip Code 22207	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td>75.00</td> </tr> </table>	75.00																			
75.00																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) .....

88.87

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



X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

MM / DD / YYYY

725.71

MM / DD / YYYY

117.26

Date of Disbursement

157.08

FEC Schedule B ( Form 3X) (Revised 02/2003)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 114 / 141

<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)  
HillPAC**A.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address Post Office Box 25505

City State Zip Code  
Lehigh Valley PA 18002-5505Purpose of Disbursement  
Telephone Service

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-1149

Date of Disbursement

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

Amount of Each Disbursement this Period

697.65

**B.**

Full Name (Last, First, Middle Initial)

CIT Technology Fin Serv, Inc.

Mailing Address Post Office Box 550599

City State Zip Code  
Jacksonville FL 32255Purpose of Disbursement  
Equipment

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-1150

Date of Disbursement

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

Amount of Each Disbursement this Period

472.59

**C.**

Full Name (Last, First, Middle Initial)

AT&amp;T Mobility

Mailing Address PO Box 6463

City State Zip Code  
Carol Stream IL 60197-6463Purpose of Disbursement  
Telephone Service

Candidate Name

101  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-1151

Date of Disbursement

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

Amount of Each Disbursement this Period

38222.31

SUBTOTAL of Disbursements This Page (optional) .....

39392.55

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)

PAGE 115 / 141

<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)  
HillPAC

**A.** Full Name (Last, First, Middle Initial)  
Automated Signature Technology

Mailing Address 112 Oak Grove Road  
Suite 107

City State Zip Code  
Sterling VA 20166

Purpose of Disbursement  
Equipment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1152

Date of Disbursement

1 2 / 2 2 / 2 0 0 8

Amount of Each Disbursement this Period

74.25

**B.** Full Name (Last, First, Middle Initial)  
Allied Telecom

Mailing Address Post Office Box 758792

City State Zip Code  
Baltimore MD 21275-8792

Purpose of Disbursement  
Internet Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1153

Date of Disbursement

1 2 / 2 2 / 2 0 0 8

Amount of Each Disbursement this Period

262.50

**C.** Full Name (Last, First, Middle Initial)  
Allied Telecom

Mailing Address Post Office Box 758792

City State Zip Code  
Baltimore MD 21275-8792

Purpose of Disbursement  
Internet Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-1154

Date of Disbursement

1 2 / 2 2 / 2 0 0 8

Amount of Each Disbursement this Period

620.00

**SUBTOTAL** of Disbursements This Page (optional) .....

956.75

**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 116 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Allied Telecom	<b>Transaction ID:</b> SB21B-1155 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 758792	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	8												
City Baltimore State MD Zip Code 21275-8792	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Internet Service Candidate Name	<table border="1"> <tr> <td colspan="10">262.50</td> </tr> </table>	262.50																			
262.50																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Capital Records	<b>Transaction ID:</b> SB21B-1156 <b>Date of Disbursement</b>																				
Mailing Address 44112 Mercure Circle	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	8												
City Sterling State VA Zip Code 20166	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Moving Fees Candidate Name	<table border="1"> <tr> <td colspan="10">1120.30</td> </tr> </table>	1120.30																			
1120.30																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Comcast	<b>Transaction ID:</b> SB21B-1157 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 3005	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	8												
City Southeastern State PA Zip Code 19398	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Subscription Candidate Name	<table border="1"> <tr> <td colspan="10">735.01</td> </tr> </table>	735.01																			
735.01																					
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) .....

**2117.81**

**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 117 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) DirecTV	<b>Transaction ID:</b> SB21B-1158 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 60036	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	8												
City Los Angeles State CA Zip Code 90060	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Subscription Candidate Name	<table border="1"> <tr> <td colspan="10">63.06</td> </tr> </table>	63.06																			
63.06																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Eiring Consulting	<b>Transaction ID:</b> SB21B-1159 <b>Date of Disbursement</b>																				
Mailing Address 1213 Duncan Place, N.E.	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	8												
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting/ Fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Excel Micro	<b>Transaction ID:</b> SB21B-1160 <b>Date of Disbursement</b>																				
Mailing Address 505 Kedron Avenue	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	8												
City Folsom State PA Zip Code 19033	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Storage Rent Candidate Name	<table border="1"> <tr> <td colspan="10">210.00</td> </tr> </table>	210.00																			
210.00																					
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) .....

**3273.06**

**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 118 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Excel Micro</p> <p>Mailing Address 505 Kedron Avenue</p> <p>City Folsom State PA Zip Code 19033</p> <p>Purpose of Disbursement Internet Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1161</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="449.25"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) JK Moving and Storage</p> <p>Mailing Address 44112 Mercure Circle</p> <p>City Sterling State VA Zip Code 20166</p> <p>Purpose of Disbursement Moving Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1162</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="299.74"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) LDI/Color Toolbox</p> <p>Mailing Address 50 Jericho Quadrangle</p> <p>City Jericho State NY Zip Code 11753</p> <p>Purpose of Disbursement Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1163</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="412.50"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1161.49**

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 119 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Lexis Nexis Mailing Address Post Office Box 7247-7090	<b>Transaction ID:</b> SB21B-1164 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 2 / 2 0 0 8</div> </div>
City Philadelphia State PA Zip Code 19170-7090 Purpose of Disbursement Subscription Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>1292.42</div> <div>001 Category/ Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Sprint Mailing Address Post Office Box 219623	<b>Transaction ID:</b> SB21B-1165 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 2 / 2 0 0 8</div> </div>
City Kansas City State MO Zip Code 64121-9623 Purpose of Disbursement Internet Service Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>607.17</div> <div>001 Category/ Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Sprint Mailing Address Post Office Box 219623	<b>Transaction ID:</b> SB21B-1166 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 2 / 2 0 0 8</div> </div>
City Kansas City State MO Zip Code 64121-9623 Purpose of Disbursement Internet Service Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>607.17</div> <div>001 Category/ Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

2506.76

**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)

PAGE 120 / 141

<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

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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Sprint	<b>Transaction ID:</b> SB21B-1167 <b>Date of Disbursement</b>
Mailing Address Post Office Box 219623	<div> <div><sup>M</sup>1<div><sup>M</sup>2</div></div> <div>/</div> <div><sup>D</sup>2<div><sup>D</sup>2</div></div> <div>/</div> <div><sup>Y</sup>2<div><sup>Y</sup>0</div><div><sup>Y</sup>0</div><div><sup>Y</sup>8</div></div> </div>
City Kansas City State MO Zip Code 64121-9623	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Internet Service Candidate Name	<div>239.54</div>
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) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Staples Business Advantage	<b>Transaction ID:</b> SB21B-1168 <b>Date of Disbursement</b>
Mailing Address Dept DC PO Box 415256	<div> <div><sup>M</sup>1<div><sup>M</sup>2</div></div> <div>/</div> <div><sup>D</sup>2<div><sup>D</sup>2</div></div> <div>/</div> <div><sup>Y</sup>2<div><sup>Y</sup>0</div><div><sup>Y</sup>0</div><div><sup>Y</sup>8</div></div> </div>
City Boston State MA Zip Code 02241-5256	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies Candidate Name	<div>114.93</div>
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) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Total Fundraising Strat., Inc.	<b>Transaction ID:</b> SB21B-1169 <b>Date of Disbursement</b>
Mailing Address 3005 South Lamar Boulevard Number D-109-347	<div> <div><sup>M</sup>1<div><sup>M</sup>2</div></div> <div>/</div> <div><sup>D</sup>2<div><sup>D</sup>2</div></div> <div>/</div> <div><sup>Y</sup>2<div><sup>Y</sup>0</div><div><sup>Y</sup>0</div><div><sup>Y</sup>8</div></div> </div>
City Austin State TX Zip Code 78704	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Shipping Candidate Name	<div>27.88</div>
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) .....

382.35

**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 121 / 141

<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)  
HillPAC

A.

Full Name (Last, First, Middle Initial)  
United Business Technologies

Mailing Address 9218 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Printing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1170

Date of Disbursement

12 / 22 / 2008

Amount of Each Disbursement this Period

630.41

B.

Full Name (Last, First, Middle Initial)  
UPS

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1171

Date of Disbursement

12 / 22 / 2008

Amount of Each Disbursement this Period

13.69

C.

Full Name (Last, First, Middle Initial)  
UPS

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-1172

Date of Disbursement

12 / 22 / 2008

Amount of Each Disbursement this Period

16.75

SUBTOTAL of Disbursements This Page (optional) .....

660.85

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 122 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Washington Gas	<b>Transaction ID:</b> SB21B-1173 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 9001036	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	8												
City State Zip Code Louisville KY 40290-1036	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Office Utilities Candidate Name	<table border="1"> <tr> <td colspan="10">430.71</td> </tr> </table>	430.71																			
430.71																					
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) ▼	001 Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) SL Green Management, LLC	<b>Transaction ID:</b> SB21B-1174 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 5162 Building 420	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	8												
City State Zip Code New York NY 10087-5162	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Moving Fees Candidate Name	<table border="1"> <tr> <td colspan="10">345.00</td> </tr> </table>	345.00																			
345.00																					
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) ▼	001 Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) SL Green Management, LLC	<b>Transaction ID:</b> SB21B-1175 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 5162 Building 420	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	8												
City State Zip Code New York NY 10087-5162	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Office Utilities Candidate Name	<table border="1"> <tr> <td colspan="10">235.00</td> </tr> </table>	235.00																			
235.00																					
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) ▼	001 Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1010.71

**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 123 / 141

<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)  
HillPAC

A.

Full Name (Last, First, Middle Initial)  
SL Green Management, LLC

Transaction ID: SB21B-1176

Date of Disbursement

Mailing Address Post Office Box 5162  
Building 420

/   /

City New York State NY Zip Code 10087-5162

Amount of Each Disbursement this Period

Purpose of Disbursement  
Rent

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

7117.33

B.

Full Name (Last, First, Middle Initial)  
American Express

Transaction ID: SB21B-1200

Date of Disbursement

Mailing Address Post Office Box 1270

/   /

City Newark State NJ Zip Code 07101

Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Process Fee

101

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

1868.13

C.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc.

Transaction ID: SB21B-1358

Date of Disbursement

Mailing Address P.O. Box 390728

/   /

City Cambridge State MA Zip Code 02139

Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Process Fee

101

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

2.87

SUBTOTAL of Disbursements This Page (optional) .....

8988.33

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

448.61

1.19

0.80

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

42.31

9500.27

21.18

FEC Schedule B ( Form 3X) (Revised 02/2003)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

9081.92

1693.00

650.24

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 127 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) New York State Employment	<b>Transaction ID:</b> SB21B-1345 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 4119	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Binghamton State NY Zip Code 13902	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td>546.95</td> </tr> </table>	546.95																			
546.95																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	<b>Transaction ID:</b> SB21B-1348 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 177	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Richmond State VA Zip Code 23218	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td>442.55</td> </tr> </table>	442.55																			
442.55																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) New York State Employment	<b>Transaction ID:</b> SB21B-1351 <b>Date of Disbursement</b>																				
Mailing Address Post Office Box 4119	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Binghamton State NY Zip Code 13902	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td>6.84</td> </tr> </table>	6.84																			
6.84																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) .....

996.34

**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 128 / 141

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) New York State Employment	<b>Transaction ID:</b> SB21B-1354 <b>Date of Disbursement</b>
Mailing Address Post Office Box 4119	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Binghamton State NY Zip Code 13902	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Taxes Candidate Name	<div>277.59</div> <div>001</div> <div>Category/Type</div>
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) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Jon Lovett	<b>Transaction ID:</b> SB21B-1288 <b>Date of Disbursement</b>
Mailing Address 1743 18th Street NW Basement	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div>192.39</div> <div>001</div> <div>Category/Type</div>
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) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Lindsey Katherine Jack	<b>Transaction ID:</b> SB21B-1289 <b>Date of Disbursement</b>
Mailing Address 2601 Woodley Place, N.W. Apartment 915	<div> <div>12</div> <div>31</div> <div>2008</div> </div>
City Washington State DC Zip Code 20008	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div>260.37</div> <div>001</div> <div>Category/Type</div>
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) .....

**730.35**

**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 129 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Monica Jordan	<b>Transaction ID:</b> SB21B-1290 <b>Date of Disbursement</b>
Mailing Address 19565 Black Olive Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City Boca Raton State FL Zip Code 33498	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div> <div>490.11</div> </div>
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) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Tamera Luzzatto	<b>Transaction ID:</b> SB21B-1291 <b>Date of Disbursement</b>
Mailing Address 3014 32nd Street, N.W.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20008	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div> <div>540.61</div> </div>
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) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Philippe Reines	<b>Transaction ID:</b> SB21B-1292 <b>Date of Disbursement</b>
Mailing Address 1545 18th Street, N.W. Apartment 822	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary Candidate Name	<div> <div>611.86</div> </div>
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) .....

**1642.58**

**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 130 / 141

<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

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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Ann Lewis</p> <p>Mailing Address 4550 North Park Avenue #708</p> <p>City Chevy Chase State MD Zip Code 20815</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1293</p> <p>Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 623.14</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Robert Russo</p> <p>Mailing Address 3 Washington Circle NW Apartment 105</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1294</p> <p>Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 742.09</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kelly Mehlenbacher</p> <p>Mailing Address 902 South Quincy Street</p> <p>City Arlington State VA Zip Code 22204</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1295</p> <p>Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 777.61</p> <p>001 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

2142.84

**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)

PAGE 131 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) John Osterholt	<b>Transaction ID:</b> SB21B-1296 <b>Date of Disbursement</b>																				
Mailing Address 4740 Sarazen Drive	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Hollywood State FL Zip Code 33021	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">818.09</td> </tr> </table>	818.09																			
818.09																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ali Rubin	<b>Transaction ID:</b> SB21B-1297 <b>Date of Disbursement</b>																				
Mailing Address 1515 O Street NW Apartment 305	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Washington State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">953.72</td> </tr> </table>	953.72																			
953.72																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Kate Sokolov	<b>Transaction ID:</b> SB21B-1298 <b>Date of Disbursement</b>																				
Mailing Address 2000 N Street NW Apartment 806	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Washington State DC Zip Code 20036	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">953.72</td> </tr> </table>	953.72																			
953.72																					
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) .....

**2725.53**

**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 132 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Donna Camellia Meehan</p> <p>Mailing Address 1682 North Quinn Street</p> <p>City Arlington State VA Zip Code 22209</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1299  <b>Date of Disbursement</b>  <div> <div>12</div> <div>31</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1036.14</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Stephanie Gent</p> <p>Mailing Address 2000 N Street NW Apartment 801</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1300  <b>Date of Disbursement</b>  <div> <div>12</div> <div>31</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1049.52</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kathryn Balcerzak</p> <p>Mailing Address 7303 Meadow Wood Way</p> <p>City Clarksville State MD Zip Code 21029</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1301  <b>Date of Disbursement</b>  <div> <div>12</div> <div>31</div> <div>2008</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1108.74</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3194.40**

**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 133 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Abigail Eve Sugrue</p> <p>Mailing Address 17 McGuiness Boulevard Apartment 3</p> <p>City Brooklyn State NY Zip Code 11222</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1302  <b>Date of Disbursement</b>  <div>12 / 31 / 2008</div></p> <p><b>Amount of Each Disbursement this Period</b>  <div>1218.66</div></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Emily Aden</p> <p>Mailing Address 1101 New Hampshire Avenue, NW Apartment 311</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1303  <b>Date of Disbursement</b>  <div>12 / 31 / 2008</div></p> <p><b>Amount of Each Disbursement this Period</b>  <div>729.00</div></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Huma Abedin</p> <p>Mailing Address 2020 12th Street, N.W. Number 709</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1304  <b>Date of Disbursement</b>  <div>12 / 31 / 2008</div></p> <p><b>Amount of Each Disbursement this Period</b>  <div>1376.27</div></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3323.93**

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

FEC Schedule B ( Form 3X) (Revised 02/2003)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 136 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Bryan Pagliano	<b>Transaction ID:</b> SB21B-1311 <b>Date of Disbursement</b>																				
Mailing Address 1601 Colonial Terrace	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Arlington State VA Zip Code 22209	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1767.71</td> </tr> </table>	1767.71																			
1767.71																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Maura Pally	<b>Transaction ID:</b> SB21B-1312 <b>Date of Disbursement</b>																				
Mailing Address 1757 Q Street, N.W. Apartment F	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1805.37</td> </tr> </table>	1805.37																			
1805.37																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Timothy Green	<b>Transaction ID:</b> SB21B-1313 <b>Date of Disbursement</b>																				
Mailing Address 1315 North Van Dorn Street	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Alexandria State VA Zip Code 22304	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1840.56</td> </tr> </table>	1840.56																			
1840.56																					
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) .....

**5413.64**

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



X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
HillPAC

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 138 / 141

<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)  
HillPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Allison Wright	<b>Transaction ID:</b> SB21B-1317 <b>Date of Disbursement</b>																				
Mailing Address 6208 32nd Place, 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>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Washington State DC Zip Code 20015	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2643.64</td> </tr> </table>	2643.64																			
2643.64																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Capricia Marshall	<b>Transaction ID:</b> SB21B-1318 <b>Date of Disbursement</b>																				
Mailing Address 4703 Windom Place, N.W.	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Washington State DC Zip Code 20016	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2908.04</td> </tr> </table>	2908.04																			
2908.04																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Karen Persichili, Keogh	<b>Transaction ID:</b> SB21B-1319 <b>Date of Disbursement</b>																				
Mailing Address 1630 11th Avenue	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City Brooklyn State NY Zip Code 11215	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">3187.18</td> </tr> </table>	3187.18																			
3187.18																					
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) .....

**8738.86**

**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 139 / 141

<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)  
HillPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Peter Daou</p> <p>Mailing Address 400 Chambers Street Apartment 12D</p> <p>City New York State NY Zip Code 10282</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1320</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3750.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Shelly Moskwa</p> <p>Mailing Address 120 Grafton Street</p> <p>City Chevy Chase State MD Zip Code 20815</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1321</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4127.79"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CyberSource</p> <p>Mailing Address 1295 Charleston Road</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Process Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1368</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="515.52"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**8393.31**

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

**396802.47**

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 140 / 141

<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)  
HillPAC

A.

Full Name (Last, First, Middle Initial)

Arkady Rubinsteyn

Mailing Address 290 North Commonwealth

City  
Chicago

State  
IL

Zip Code  
60657

Purpose of Disbursement  
Refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB28A-1371

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2008

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional) .....

20.00

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

20.00

Image# 29990936066

Form/Schedule: **F3X**

Transaction ID:

The Committee would like to change our filing status from Monthly to Semi-Annual.

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