

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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
Berkley For Congress

ADDRESS (number and street) 3069 Conquista Court
 Check if different than previously reported. (ACC)
Las Vegas NV 89121

2. **FEC IDENTIFICATION NUMBER** C00325738
CITY **STATE** **ZIP CODE**
STATE DISTRICT NV 01
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 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 10 01 2007 through 12 31 2007

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 Linda L. Goldberg

Signature of Treasurer Electronically Filed by Linda L. Goldberg Date 01 29 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Berkley For Congress

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	142141.67	1358935.17
(b) Total Contribution Refunds (from Line 20(d)).....	2500.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	139641.67	1356435.17
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	115821.37	600174.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	11845.50	17169.46
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	103975.87	583004.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1159484.92	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 12/2003)

Write or Type Committee Name
Berkley For Congress

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

34350.00

929405.34

(ii) Unitemized.....

300.00

18924.50

(iii) TOTAL of contributions

34650.00

948329.84

from individuals..... ▶

16.24

179.90

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

107475.43

410425.43

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))

142141.67

1358935.17

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

11845.50

17169.46

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

11595.40

43880.62

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

165582.57

1419985.25

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	115821.37	600174.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2500.00	2500.00
21. OTHER DISBURSEMENTS.....	151000.00	392599.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	269321.37	995273.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1263223.72
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	165582.57
25. SUBTOTAL (add Line 23 and Line 24).....	1428806.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	269321.37
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1159484.92

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate Berkley Shelley		Candidate ID Number H8NV01071
Name of Principal Campaign Committee Berkley For Congress		Committee ID Number C C00325738
Committee Address 3069 Conquista Court		
City Las Vegas	State NV	ZIP 89121
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	1256525.25	164610.00
2. Aggregate amount of contributions from personal funds of the candidate	0.00	0.00
3. Gross receipts minus the candidate's personal contributions	1256525.25	164610.00

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

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

FOR LINE NUMBER: PAGE 6 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Tracy Albers

Mailing Address 48 Lakeview Avenue

City State Zip Code
Piedmont CA 94611

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

Name of Employer Self Occupation Volunteer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 7

Transaction ID: C956000

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard A. Alcalde

Mailing Address 210 D Street SE

City State Zip Code
Washington DC 20003

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

Name of Employer Potomac Partners DC Occupation Associate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 5 / 2 0 0 7

Transaction ID: C964867

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Scott Becker, JD

Mailing Address 315 Vernon Ave.

City State Zip Code
Glencoe IL 60022

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

Name of Employer McGuire Woods Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 0 7

Transaction ID: C957186

Amount of Each Receipt this Period
375.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1875.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Michael J. Bellon

Mailing Address 1408 Saintsbury Drive

City State Zip Code
Las Vegas NV 89144

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

Name of Employer emagine Networks Occupation Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: C964871

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Frederic S. Berger

Mailing Address 7729 Brookville Road

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Louis Berger Group Inc Occupation Engineering Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: C964287

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lucius Blanchard

Mailing Address 2023 Shadow Brook Way

City State Zip Code
Henderson NV 89074

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

Name of Employer Self Occupation Physician-Dermatology

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: C964284

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A. Full Name (Last, First, Middle Initial) Nicholas G. Cavarocchi</p> <p>Mailing Address 316 Pennsylvania Avenue SE, Suite</p> <p>City State Zip Code Washington DC 20003</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cavarocchi Ruscio Dennis Partner Associates</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2007</p> <p>Transaction ID: C964291</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Jaqueline A. Cohen</p> <p>Mailing Address 4611 Butterworth Place NW</p> <p>City State Zip Code Washington DC 20016</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Consultant</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 02 / 2007</p> <p>Transaction ID: C955664</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Jean Cohen</p> <p>Mailing Address 8 Sycamore Road</p> <p>City State Zip Code Orinda CA 94563</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Homemaker</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 02 / 2007</p> <p>Transaction ID: C955997</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>1750.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p> </p>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
James R. Cologan

Mailing Address 5250 Numaga Pass

City State Zip Code
Carson City NV 89703

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Sierra Surgery and Imaging Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: C957187

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Thomas V. Di Bello

Mailing Address 403 Timber Grove Place

City State Zip Code
Friendswood TX 77546-8409

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Dynamic O&P President/CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: C957141

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Donald R. Diamond

Mailing Address 2200 E River Road, Suite 115

City State Zip Code
Tucson AZ 85718

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Diamond Ventures Inc Real Estate Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: C956978

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Sandra Dorman

Mailing Address 100 Woodland Way

City State Zip Code
Piedmont CA 94611

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

Name of Employer Self Occupation
Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 02 / 2007

Transaction ID: C955999

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Ralph C. Duchin

Mailing Address 4424 E La Paloma Drive

City State Zip Code
Tucson AZ 85718

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

Name of Employer Self Occupation
Petroleum Geologist

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 22 / 2007

Transaction ID: C962857

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Leonard Eckhaus

Mailing Address 10638 Mandarin Avenue

City State Zip Code
Las Vegas NV 89135

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

Name of Employer Self Occupation
Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
11 / 27 / 2007

Transaction ID: C964492

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Jeff A. Farber

Mailing Address 83 Paseo Mirasol

City Tiburon State CA Zip Code 94920

FEC ID number of contributing federal political committee. C

Name of Employer: Koret Foundation Occupation: Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
11 / 01 / 2007

Transaction ID: C963457

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Mark L. Fine

Mailing Address 3960 Howard Hughes Parkway, Ste 75

City Las Vegas State NV Zip Code 89109

FEC ID number of contributing federal political committee. C

Name of Employer: Mark Fine & Associates Occupation: Real Estate Developer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
11 / 20 / 2007

Transaction ID: C964384

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Barbara T. Frank

Mailing Address 2194 Constitution Drive

City San Jose State CA Zip Code 95124

FEC ID number of contributing federal political committee. C

Name of Employer: Self Occupation: Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
10 / 02 / 2007

Transaction ID: C955993

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Jennifer Friedman

Mailing Address 57 Lincoln Avenue

City State Zip Code
Piedmont CA 94611

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

Name of Employer Self Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: C963022

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Michael Ginsburg

Mailing Address 1427 Pathfinder

City State Zip Code
Henderson NV 89014

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

Name of Employer Sher Institute Occupation Biologist

Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: C955998

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

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

Mailing Address 525 2nd Stret, NE

City State Zip Code
Washington DC 20002

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

Name of Employer The Grossman Group, LLC Occupation Principle

Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: C964297

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Judith D. Guzman

Mailing Address 528 Rock Glen Drive

City Wynnewood State PA Zip Code 19096-2621

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

Name of Employer TNS Intersearch Occupation Management Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 27 / 2007
Transaction ID: C966471
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Marc Karn

Mailing Address 2 Fox Run Road

City Falmouth State ME Zip Code 04105

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

Name of Employer Maine Artificial Limb & Brace Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 15 / 2007
Transaction ID: C957162
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jan H. Kessler

Mailing Address 62 Cambrian Avenue

City Piedmont State CA Zip Code 94611

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

Name of Employer Self Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 02 / 2007
Transaction ID: C955995
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Randall E. Kessler

Mailing Address 63 Cambrian Ave.

City Alameda State CA Zip Code 94501

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

Name of Employer Kessler & Kessler Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2007

Transaction ID: C963515

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 8900 Victory Lane

City Potomac State MD Zip Code 20854

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

Name of Employer Self Occupation Financial Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 15 / 2007

Transaction ID: C957168

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Bruce D. Kronick

Mailing Address 9161 Tuder Park Place

City Las Vegas State NV Zip Code 89145

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

Name of Employer Kronick Industries Inc. Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 11 / 01 / 2007

Transaction ID: C963458

Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Stuart S. Kurlander

Mailing Address 2601 Foxhall Road NW

City State Zip Code
Washington DC 20007

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

Name of Employer Occupation
Latham & Watkins, LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: C955668

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Michael B. Levy

Mailing Address 230 8th Street, S.E.

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation
Brownstein Hyatt Farber & Strickland P Legislative Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: C964292

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

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

Mailing Address 10225 Frederick Ave. #211

City State Zip Code
Kensington MD 20895

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

Name of Employer Occupation
Univeristy of Baltimore Law School Professor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: C957173

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Thomas J. Mallon

Mailing Address 36 Regent Dr.

City State Zip Code
Oak Brook IL 60523

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

Name of Employer Regent Surgical Health Occupation President/CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: C957188

Amount of Each Receipt this Period
375.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Lothar L. Mayer

Mailing Address 6017 Old Ocean Boulevard

City State Zip Code
Ocean Ridge FL 33435

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

Name of Employer Self Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: C964829

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Joshua C. Miller

Mailing Address 1 Ravina Ct.

City State Zip Code
Henderson NV 89052

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

Name of Employer Nevada Holding Services Inc. Occupation Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: C957178

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1625.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Jennifer Laszlo Mizrahi

Mailing Address 1306 Beachview Road

City State Zip Code
Annapolis MD 21403

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

Name of Employer Occupation
The Israel Project President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 18 / 2007

Transaction ID: C957458

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Michael R. Niakani

Mailing Address 109D7 Stonecutter Place

City State Zip Code
North Potomac MD 20878

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

Name of Employer Occupation
Utility Systems Engineer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 02 / 2007

Transaction ID: C955670

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael Pieper

Mailing Address 39644 Lovettsville Road

City State Zip Code
Lovettsville VA 20180

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

Name of Employer Occupation
R & R Partners Gov't & Public Affairs Managing Direct

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 18 / 2007

Transaction ID: C957460

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Melvin Pohl

Mailing Address 11163 Crimson Dusk Ct.

City Las Vegas State NV Zip Code 89135-7809

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

Name of Employer Central Recovery Treatment Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 300.00

Transaction ID: C966481

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Maria Robinson

Mailing Address 2201 Glenbrook Way

City Las Vegas State NV Zip Code 89117

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

Name of Employer Self Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 4000.00

Transaction ID: C964868

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Maria Robinson

Mailing Address 2201 Glenbrook Way

City Las Vegas State NV Zip Code 89117

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

Name of Employer Self Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 1700.00

Transaction ID: C964869

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **2300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Amnon Rodan

Mailing Address 6114 La Salle Avenue #442

City State Zip Code
Oakland CA 94611-2802

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Marketing Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
10 / 02 / 2007

Transaction ID: C955996

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
James L. Sammet

Mailing Address 179 Starfish Court

City State Zip Code
Marina CA 93933

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
10 / 02 / 2007

Transaction ID: C956001

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Lili-Charlotte Sarnoff

Mailing Address 7507 Hampden Lane

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Sculpter

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2007

Transaction ID: C963036

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial) Howard I. Simon		Date of Receipt MM / DD / YYYY 12 / 04 / 2007
Mailing Address 150 East 58th Street		Transaction ID: C964830
City New York	State NY	Zip Code 10155
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Barbara Swersky		Date of Receipt MM / DD / YYYY 12 / 27 / 2007
Mailing Address 245 E. 87th Street		Transaction ID: C966472
City New York	State NY	Zip Code 10128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Self	Occupation Real Estate Broker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

C.

Full Name (Last, First, Middle Initial) Judith F. Terra		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 4845 Colorado Ave. NW		Transaction ID: C957183
City Washington	State DC	Zip Code 20011-3731
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Philanthropist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Norman L. Traeger

Mailing Address 3700 Paradise Drive

City Tiburon State CA Zip Code 94920

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

Name of Employer Self Occupation Real Estate Investor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 02 / 2007

Transaction ID: C963526

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Cheryl Weiner

Mailing Address 4248 50th Street, NW

City Washington State DC Zip Code 20016

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

Name of Employer Self Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 02 / 2007

Transaction ID: C955672

Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Mark E. Wheeler

Mailing Address 32788 K 22

City Sioux City State IA Zip Code 51108

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

Name of Employer Center for Neuroscience Orthopedics an Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 15 / 2007

Transaction ID: C957190

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Dayna Ziegler

Mailing Address 1260 N. Dutton #270

City State Zip Code
Santa Rosa CA 95401

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

Name of Employer Self Occupation
Self Realtor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: C955994

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Gwen Zuares

Mailing Address 6940 Oregon Ave NW

City State Zip Code
Washington DC 20015-1420

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

Name of Employer Self Occupation
Self Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: C964831

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **750.00**

TOTAL This Period (last page this line number only) ► **34350.00**

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

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

FOR LINE NUMBER: PAGE 23 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. C C00000935

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 179.90

Date of Receipt MM / DD / YYYY
12 / 10 / 2007

Transaction ID: C965311

Amount of Each Receipt this Period 10.64

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Fundraising assistance

B. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. C C00000935

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 179.90

Date of Receipt MM / DD / YYYY
12 / 26 / 2007

Transaction ID: C966370

Amount of Each Receipt this Period 5.60

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Fundraising activities

SUBTOTAL of Receipts This Page (optional)	16.24
TOTAL This Period (last page this line number only)	16.24

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

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

FOR LINE NUMBER: PAGE 24 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
AFLAC Inc.

Mailing Address 1932 Wynnton Road
Worldwide Headquarters

City Columbus State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 20 / 2007
Transaction ID: C964372
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4720 Montgomery Lane Suite 430

City Bethesda State MD Zip Code 20814-5320

FEC ID number of contributing federal political committee. **C** C00423228

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2007
Transaction ID: C963453
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Altria Group Inc

Mailing Address 101 Constitution Avenue, NW, Suite

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 27 / 2007
Transaction ID: C966474
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
American Academy of Dermatology Association

Mailing Address 1350 I Street, NW
Suite 870

City State Zip Code
Washington DC 20005-3305

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	0	7

Transaction ID: C963037

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Academy of Family Physicians

Mailing Address 2023 Massachusetts Avenue, NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00411553

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: C966478

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Academy of Ophthalmology OphthPAC

Mailing Address 1101 Vermont Avenue NW, Ste 700

City State Zip Code
Washington DC 20005-3570

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: C963896

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 100
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
American Academy of Otolaryngology ENT PAC

Mailing Address One Prince Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00306449

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: C963897

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Association for Justice

Mailing Address 1050 31st Street NW

City State Zip Code
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: C964299

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American College of Cardiology PAC

Mailing Address 2400 N. Street NW

City State Zip Code
Washington DC 20037

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C964374

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
American College of Physicians Services Inc PAC
 Mailing Address 2011 Pennsylvania Avenue, NW, Suit
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00403881
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 2000.00
 Date of Receipt MM / DD / YYYY 10 / 25 / 2007
Transaction ID: C963042
 Amount of Each Receipt this Period 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American College of Radiology Association PAC
 Mailing Address 1891 Preston White Drive
 City Reston State VA Zip Code 20191
 FEC ID number of contributing federal political committee. **C** C00393520
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 3000.00
 Date of Receipt MM / DD / YYYY 12 / 04 / 2007
Transaction ID: C964828
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American College of Surgeons Professional Assn
 Mailing Address 1640 Wisconsin Avenue NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C** C00382424
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1000.00
 Date of Receipt MM / DD / YYYY 11 / 19 / 2007
Transaction ID: C964306
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 100
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
American Council of Engineering Companies ACEC PAC

Mailing Address 1015 15th Street, Suite 802

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C964377

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Council of Life Insurers

Mailing Address 101 Constitution Avenue, NW Suite

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00147066

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: C966484

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Dietetic Association ADAPAC

Mailing Address 1120 Connecticut Avenue Suite 480

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00143560

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: C966475

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **4000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address 325 Seventh Street, NW, Suite 700
Liberty Place

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2007

Transaction ID: C967422

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Hotel & Lodging Association PAC FKA Ameri

Mailing Address 1201 New York Avenue,NW, Suite 600

City Washington State DC Zip Code 20005-3931

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt MM / DD / YYYY
10 / 25 / 2007

Transaction ID: C963039

Amount of Each Receipt this Period 3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Hotel & Lodging Association PAC FKA Ameri

Mailing Address 1201 New York Avenue,NW, Suite 600

City Washington State DC Zip Code 20005-3931

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt MM / DD / YYYY
11 / 19 / 2007

Transaction ID: C964286

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
American Nurses Association ANA PAC
Mailing Address 8515 Georgia Avenue, Suite 400
City Silver Spring State MD Zip Code 20910-3492
FEC ID number of contributing federal political committee. **C** C00017525
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 11 / 19 / 2007
Transaction ID: C964301
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Podiatric Medical Association
Mailing Address 9312 Old Georgetown Road
City Bethesda State MD Zip Code 20814-1698
FEC ID number of contributing federal political committee. **C** C00008839
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 11 / 01 / 2007
Transaction ID: C963454
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists ASA PAC
Mailing Address 520 N. Northwest Highway
City Park Ridge State IL Zip Code 60068
FEC ID number of contributing federal political committee. **C** C00255752
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 11 / 19 / 2007
Transaction ID: C964309
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Anheuser Busch Companies ABPAC
Mailing Address One Busch Place
City State Zip Code
Saint Louis MO 63118
FEC ID number of contributing federal political committee. **C** C00034488
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7
Transaction ID: C966776
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Barcardi USA Inc
Mailing Address 2100 Biscayne Boulevard
City State Zip Code
Miami FL 33137
FEC ID number of contributing federal political committee. **C** C00160838
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7
Transaction ID: C964375
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Brown-Forman Corporation Brown-Forman/Lenox PAC
Mailing Address PO Box 1080
City State Zip Code
Louisville KY 40201-1080
FEC ID number of contributing federal political committee. **C** C00059733
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7
Transaction ID: C963894
Amount of Each Receipt this Period
2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Burlington Northern Santa Fe BNSF Rail PAC

Mailing Address PO Box 961039, Suite 220

City State Zip Code
Ft. Worth TX 76161-0039

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID: C966476

Amount of Each Receipt this Period

2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
College of American Pathologists PAC PATH PAC

Mailing Address 1350 I Street, NW, Suite 590

City State Zip Code
Washington DC 20005-3305

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C966477

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Communication Workers of America - CWA COPE PAC

Mailing Address 501 Third Street, NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: C964866

Amount of Each Receipt this Period

2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

5500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

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

Mailing Address 300 Willbrook Office Park

City State Zip Code
Fairport NY 14450

FEC ID number of contributing federal political committee. **C** C00304832

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 0 / 2 0 0 7

Transaction ID: C966095

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Consumer Electronics Association

Mailing Address 2500 Wilson Boulevard

City State Zip Code
Arlington VA 22201-3834

FEC ID number of contributing federal political committee. **C** C00375048

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 0 7

Transaction ID: C963038

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Desert Caucus

Mailing Address PO Box 31564

City State Zip Code
Tucson AZ 85751

FEC ID number of contributing federal political committee. **C** C00102368

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 2 / 2 0 0 7

Transaction ID: C962862

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 100

(check only one)

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

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)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Desert Caucus

Mailing Address PO Box 31564

City Tucson State AZ Zip Code 85751

FEC ID number of contributing federal political committee. **C** C00102368

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: MM / DD / YYYY
10 / 22 / 2007

Transaction ID: C962863

Amount of Each Receipt this Period: 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Diageo N.A. Inc. Employees Political Participation

Mailing Address 801 Main Avenue, P. O. Box 778

City Norwalk State CT Zip Code 06851

FEC ID number of contributing federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: MM / DD / YYYY
12 / 27 / 2007

Transaction ID: C966473

Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dickstein Shapiro Morin & Oshinsky LLP PAC

Mailing Address 2101 L Street, NW

City Washington State DC Zip Code 20037-1526

FEC ID number of contributing federal political committee. **C** C00110197

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1475.43

Date of Receipt: MM / DD / YYYY
11 / 19 / 2007

Transaction ID: C964288

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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

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

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

FOR LINE NUMBER: PAGE 35 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Dickstein Shapiro Morin & Oshinsky LLP PAC
Mailing Address 2101 L Street, NW
City Washington State DC Zip Code 20037-1526
FEC ID number of contributing federal political committee. **C** C00110197
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1475.43
Date of Receipt 11 / 20 / 2007
Transaction ID: C964385
Amount of Each Receipt this Period 475.43
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Administrative Time

B. Full Name (Last, First, Middle Initial)
Distilled Spirits PAC
Mailing Address 1250 I Street, NW, Suite 400
City Washington State DC Zip Code 20005-3922
FEC ID number of contributing federal political committee. **C** C00030734
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 11 / 13 / 2007
Transaction ID: C963893
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Employees of Northrop Grumman Corporation PAC
Mailing Address 520 S. Grand Ave., STE. 700
City Los Angeles State CA Zip Code 90071
FEC ID number of contributing federal political committee. **C** C00088591
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 11 / 01 / 2007
Transaction ID: C963455
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2475.43
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 100

(check only one)

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

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)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Engineers Political Education Committee EPEC /International Union of Operating Engineers		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
	Mailing Address 1125 17th Street, NW		Transaction ID: C957148
	City Washington	State DC	Zip Code 20036
	FEC ID number of contributing federal political committee. C C00029504		Amount of Each Receipt this Period 5000.00
	Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00		

B.	Full Name (Last, First, Middle Initial) Harrah's Entertainment Inc Employees' Political Action Committee FKA PROMUS/Harrah's PAC		Date of Receipt MM / DD / YYYY 12 / 27 / 2007
	Mailing Address 1023 Cherry Road		Transaction ID: C966777
	City Memphis	State TN	Zip Code 38117-5423
	FEC ID number of contributing federal political committee. C C00239947		Amount of Each Receipt this Period 2500.00
	Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00		

C.	Full Name (Last, First, Middle Initial) Harrah's Entertainment Inc Employees' Political Action Committee FKA PROMUS/Harrah's PAC		Date of Receipt MM / DD / YYYY 12 / 27 / 2007
	Mailing Address 1023 Cherry Road		Transaction ID: C966778
	City Memphis	State TN	Zip Code 38117-5423
	FEC ID number of contributing federal political committee. C C00239947		Amount of Each Receipt this Period 5000.00
	Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 100
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Holland & Hart LLP

Mailing Address 555 17th Street, Suite 3200, Suite

City State Zip Code
Denver CO 80202

FEC ID number of contributing federal political committee. **C** C00137729

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C964379

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
International Association of Fire Fighters Interested in Registration & Education PAC

Mailing Address 1750 New York Avenue, NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: C966482

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
International Council of Shopping Centers, Inc.

Mailing Address 1399 New York Avenue, NW Suite 720

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C964378

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
International Union of Bricklayers & Allied Crafts
Mailing Address 1776 Eye Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 12 / 27 / 2007
Transaction ID: C966480
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Irish American Democrats
Mailing Address PO Box 15638

City Chevy Chase State MD Zip Code 20825

FEC ID number of contributing federal political committee. **C** C00320432

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 11 / 19 / 2007
Transaction ID: C964298
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ironworkers Political Action League PAL
Mailing Address 1750 New York Avenue, NW, Ste 400

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 10 / 22 / 2007
Transaction ID: C962860
 Amount of Each Receipt this Period: 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 6500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
J.P. Morgan Chase & Company
Mailing Address 10 S. Dearborn St
City Chicago State IL Zip Code 60603
FEC ID number of contributing federal political committee. **C** C00104299
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 11 / 19 / 2007
Transaction ID: C964285
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Active & Retired Federal Employees NARFE
Mailing Address 606 North Washington Street
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00091561
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 12 / 27 / 2007
Transaction ID: C966483
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Association Political Action Committee NATCA PAC
Mailing Address 1325 Massachusetts Ave, NW
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00238725
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt 12 / 31 / 2007
Transaction ID: C967423
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 40 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
National Association of REALTORS PAC
Mailing Address 700 11th Street, NW

City State Zip Code
Washington DC 20001-4507

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7

Transaction ID: C967424

Amount of Each Receipt this Period
3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Restaurant Association Political Action Committee
Mailing Address 1200 Seventeenth Street NW

City State Zip Code
Washington DC 20036-3097

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 7 / 2 0 0 7

Transaction ID: C966499

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Surgical Hospitals Inc PAC
Mailing Address 30 South Wacker Drive Suite 2302

City State Zip Code
Chicago IL 60606

FEC ID number of contributing federal political committee. **C** C00435453

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 0 7

Transaction ID: C957189

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

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

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

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

FOR LINE NUMBER: PAGE 41 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
National Surgical Hospitals Inc PAC
Mailing Address 30 South Wacker Drive Suite 2302
City Chicago State IL Zip Code 60606
FEC ID number of contributing federal political committee. **C** C00435453
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 12 / 27 / 2007
Transaction ID: C966435
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Powers, Pyles, Sutter
Mailing Address 1875 Eye Street NW Twelfth Floor
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00302687
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 10 / 22 / 2007
Transaction ID: C962859
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Qualcomm Incorporated Political Action Cmmtee (QPAC)
Mailing Address 2001 Pennsylvania Ave. NW Suite 650
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00339085
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 12 / 27 / 2007
Transaction ID: C966436
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Renal Physicians Association PAC RPA PAC

Mailing Address 1700 Rockville Pike Suite 220

City State Zip Code
Rockville MD 20852

FEC ID number of contributing federal political committee. **C** C00409391

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C964376

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Sheet Metal Workers' International Association

Mailing Address 1750 New York Avenue, NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: C964865

Amount of Each Receipt this Period

5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Sierra Pacific Employees Political Action Committee

Mailing Address 6100 Neil Road

City State Zip Code
Reno NV 89511

FEC ID number of contributing federal political committee. **C** C00153379

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

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

Transaction ID: C966479

Amount of Each Receipt this Period

2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

8000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Society of Thoracic Surgeons PAC

Mailing Address 1025 Connecticut Avenue NW, Suite

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00325936

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: C964864

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Solar Energy Industries Association

Mailing Address 805 15th Street, NW, Suite 510

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00421982

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: C964295

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Tercentenary Fund- Wolf Block Schorr & Solis-Cohen

Mailing Address 1650 Arch Street, 22nd Floor

City State Zip Code
Philadelphia PA 19103-2097

FEC ID number of contributing federal political committee. **C** C00162719

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C962864

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Union Pacific Corp. Fund For Effective Government
Mailing Address 600 13th Street, NW, Suite 340
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00010470
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt 11 / 19 / 2007
Transaction ID: C964307
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
United Parcel Service UPS PAC
Mailing Address 316 Pennsylvania Avenue, Se
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C** C00064766
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 11 / 20 / 2007
Transaction ID: C964371
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Wine and Spirits Wholesalers of America
Mailing Address 805 15th Street, NW Suite 430
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00147173
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00
Date of Receipt 11 / 13 / 2007
Transaction ID: C963895
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ► 107475.43

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Biden for President, Inc.

Mailing Address P. O. Box 438

City State Zip Code
Wilmington DE 19899

FEC ID number of contributing federal political committee. **C** C00431916

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: C963823

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Hadassah

Mailing Address 605 Oakmount #2017

City State Zip Code
Las Vegas NV 89109

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: C963822

Amount of Each Receipt this Period

800.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Heath Shuler for Congress

Mailing Address P. O. Box 97

City State Zip Code
Hazelwood NC 28738

FEC ID number of contributing federal political committee. **C** C00413393

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 7

Transaction ID: C966316

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 100
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Intuit, Inc.

Mailing Address P. O. Box 34328

City State Zip Code
Seattle WA 98124

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
519.61

Date of Receipt
MM / DD / YYYY
11 / 27 / 2007

Transaction ID: C964517

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Murphy Putnam Shorr & Partners LLC

Mailing Address 901 N. Washington St. Suite 500

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7768.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2007

Transaction ID: C967498

Amount of Each Receipt this Period
7768.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Rangel for Congress

Mailing Address P. O. Box 5577

City State Zip Code
New York NY 10027

FEC ID number of contributing federal political committee. **C** C00302422

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2007

Transaction ID: C963825

Amount of Each Receipt this Period
600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **8868.00**

TOTAL This Period (last page this line number only) ► **11668.00**

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 100
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Bank of Nevada

Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 43580.62

Date of Receipt
MM / DD / YYYY
10 / 04 / 2007

Transaction ID: C963023

Amount of Each Receipt this Period
1452.40

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

B. Full Name (Last, First, Middle Initial)
Bank of Nevada

Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 43580.62

Date of Receipt
MM / DD / YYYY
10 / 13 / 2007

Transaction ID: C963024

Amount of Each Receipt this Period
1221.96

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

C. Full Name (Last, First, Middle Initial)
Bank of Nevada

Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 43580.62

Date of Receipt
MM / DD / YYYY
10 / 25 / 2007

Transaction ID: C963819

Amount of Each Receipt this Period
816.15

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

SUBTOTAL of Receipts This Page (optional) ► **3490.51**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Bank of Nevada

Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 43580.62

Date of Receipt
MM / DD / YYYY
10 / 31 / 2007

Transaction ID: C963820

Amount of Each Receipt this Period
321.79

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

B.

Full Name (Last, First, Middle Initial)
Bank of Nevada

Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 43580.62

Date of Receipt
MM / DD / YYYY
11 / 04 / 2007

Transaction ID: C963821

Amount of Each Receipt this Period
1457.68

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

C.

Full Name (Last, First, Middle Initial)
Bank of Nevada

Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 43580.62

Date of Receipt
MM / DD / YYYY
11 / 23 / 2007

Transaction ID: C964440

Amount of Each Receipt this Period
2113.98

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

SUBTOTAL of Receipts This Page (optional)

3893.45

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Bank of Nevada
Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
43580.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: C964742

Amount of Each Receipt this Period
209.41

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

B. Full Name (Last, First, Middle Initial)
Bank of Nevada
Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
43580.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	0	7

Transaction ID: C964743

Amount of Each Receipt this Period
1462.97

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

C. Full Name (Last, First, Middle Initial)
Bank of Nevada
Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
43580.62

Date of Receipt

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

Transaction ID: C966276

Amount of Each Receipt this Period
1162.71

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

SUBTOTAL of Receipts This Page (optional) ► **2835.09**

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

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

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

FOR LINE NUMBER: PAGE 50 / 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Bank of Nevada
Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
43580.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	5	/	2	0	0	7

Transaction ID: C966369

Amount of Each Receipt this Period
890.78

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

B. Full Name (Last, First, Middle Initial)
Bank of Nevada
Mailing Address P. O. Box 26237

City State Zip Code
Las Vegas NV 89195-2843

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
43580.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: C966974

Amount of Each Receipt this Period
185.57

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest income

C. Full Name (Last, First, Middle Initial)
Swett for Senate
Mailing Address P. O. Box 1937

City State Zip Code
Bow NH 03304

FEC ID number of contributing federal political committee. **C** C00301382

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	7

Transaction ID: C966371

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Return of General 2008 contribution

SUBTOTAL of Receipts This Page (optional) ► **1376.35**

TOTAL This Period (last page this line number only) ► **11595.40**

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

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

Transaction ID: D83107
Date of Disbursement

Mailing Address 65 Broadway Lobby

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	7	

City State Zip Code
New York NY 10006

Amount of Each Disbursement this Period

25.08

Purpose of Disbursement
Credit Card Services

--

Candidate Name

--

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

State: District:

B.

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

Transaction ID: D83184
Date of Disbursement

Mailing Address 65 Broadway Lobby

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	7	

City State Zip Code
New York NY 10006

Amount of Each Disbursement this Period

59.01

Purpose of Disbursement
Credit Card Services

--

Candidate Name

--

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

State: District:

C.

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

Transaction ID: D83221
Date of Disbursement

Mailing Address 65 Broadway Lobby

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	7	

City State Zip Code
New York NY 10006

Amount of Each Disbursement this Period

20.15

Purpose of Disbursement
Credit Card Services

--

Candidate Name

--

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

104.24

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Ashanti F Gholar</p> <p>Mailing Address 6945 Willow Warbler Street</p> <p>City N Las Vegas State NV Zip Code 89084</p> <p>Purpose of Disbursement Field Director</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83196</p> <p>Date of Disbursement 11 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 3004.31</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ashanti F Gholar</p> <p>Mailing Address 6945 Willow Warbler Street</p> <p>City N Las Vegas State NV Zip Code 89084</p> <p>Purpose of Disbursement Field Director</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83207</p> <p>Date of Disbursement 11 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Ashanti F Gholar</p> <p>Mailing Address 6945 Willow Warbler Street</p> <p>City N Las Vegas State NV Zip Code 89084</p> <p>Purpose of Disbursement Field Director</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83143</p> <p>Date of Disbursement 10 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 3004.31</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

7008.62

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Ashanti F Gholar Mailing Address 6945 Willow Warbler Street City N Las Vegas State NV Zip Code 89084 Purpose of Disbursement Field Director Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83257 Date of Disbursement 12 / 13 / 2007 Amount of Each Disbursement this Period 3004.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Ashanti F Gholar Mailing Address 6945 Willow Warbler Street City N Las Vegas State NV Zip Code 89084 Purpose of Disbursement Field Director Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83262 Date of Disbursement 12 / 26 / 2007 Amount of Each Disbursement this Period 1226.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) AT & T Mailing Address P.O. Box 78522 City Phoenix State AZ Zip Code 85062-8522 Purpose of Disbursement Phones-Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83108 Date of Disbursement 10 / 08 / 2007 Amount of Each Disbursement this Period 70.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4300.99

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

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

Transaction ID: D83109
Date of Disbursement

Mailing Address P.O. Box 78522

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

City State Zip Code
Phoenix AZ 85062-8522

Amount of Each Disbursement this Period

38.78

Purpose of Disbursement
Phones-Charges
Candidate Name

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

B.

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

Transaction ID: D83197
Date of Disbursement

Mailing Address P.O. Box 78522

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	7	7

City State Zip Code
Phoenix AZ 85062-8522

Amount of Each Disbursement this Period

67.58

Purpose of Disbursement
Phone charges
Candidate Name

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

C.

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

Transaction ID: D83198
Date of Disbursement

Mailing Address P.O. Box 78522

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	7	7

City State Zip Code
Phoenix AZ 85062-8522

Amount of Each Disbursement this Period

38.71

Purpose of Disbursement
Phones-Charges
Candidate Name

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

145.07

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Berkley For Congress

A.

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

Mailing Address P.O. Box 78522

City Phoenix State AZ Zip Code 85062-8522

Purpose of Disbursement
Phones-Charges
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D83229
Date of Disbursement

12 / 10 / 2007

Amount of Each Disbursement this Period

38.71

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

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

Mailing Address P.O. Box 78522

City Phoenix State AZ Zip Code 85062-8522

Purpose of Disbursement
Phone charges
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D83230
Date of Disbursement

12 / 10 / 2007

Amount of Each Disbursement this Period

67.58

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Automated Data Processing

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement
Payroll Taxes
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D83255
Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

661.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

768.19

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A. Full Name (Last, First, Middle Initial) Automated Data Processing</p> <p>Mailing Address 5800 Windward Parkway</p> <p>City Alpharetta State GA Zip Code 30005</p> <p>Purpose of Disbursement Payroll Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83206 Date of Disbursement 11 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 60.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Automated Data Processing</p> <p>Mailing Address 5800 Windward Parkway</p> <p>City Alpharetta State GA Zip Code 30005</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83194 Date of Disbursement 11 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 359.62</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Automated Data Processing</p> <p>Mailing Address 5800 Windward Parkway</p> <p>City Alpharetta State GA Zip Code 30005</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83141 Date of Disbursement 10 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 790.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1210.12

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A. Full Name (Last, First, Middle Initial) Automated Data Processing</p> <p>Mailing Address 5800 Windward Parkway</p> <p>City Alpharetta State GA Zip Code 30005</p> <p>Purpose of Disbursement Payroll Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83150 Date of Disbursement 10 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 51.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Automated Data Processing</p> <p>Mailing Address 5800 Windward Parkway</p> <p>City Alpharetta State GA Zip Code 30005</p> <p>Purpose of Disbursement Payroll Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83154 Date of Disbursement 10 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 45.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Automated Data Processing</p> <p>Mailing Address 5800 Windward Parkway</p> <p>City Alpharetta State GA Zip Code 30005</p> <p>Purpose of Disbursement Payroll Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83260 Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 110.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

206.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Automated Mailing Services

Transaction ID: D83263

Date of Disbursement

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

Mailing Address 3111 S. Valley View Blvd. Ste C-10

Amount of Each Disbursement this Period

4919.00

City Las Vegas State NV Zip Code 89102

Purpose of Disbursement
Printing, Postage & Handling

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Automated Mailing Services

Transaction ID: D83228

Date of Disbursement

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

Mailing Address 3111 S. Valley View Blvd. Ste C-10

Amount of Each Disbursement this Period

855.32

City Las Vegas State NV Zip Code 89102

Purpose of Disbursement
Postage

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Bank of Nevada

Transaction ID: D83220

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	7	7

Mailing Address P. O. Box 26237

Amount of Each Disbursement this Period

33.60

City Las Vegas State NV Zip Code 89195-2843

Purpose of Disbursement
Credit Card Services

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

5807.92

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)

Bank of Nevada

Mailing Address P. O. Box 26237

City Las Vegas State NV Zip Code 89195-2843

Purpose of Disbursement

License & Other Taxes

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83215

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Bank of Nevada

Mailing Address P. O. Box 26237

City Las Vegas State NV Zip Code 89195-2843

Purpose of Disbursement

Credit Card Services

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83185

Date of Disbursement

11 / 05 / 2007

Amount of Each Disbursement this Period

292.04

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Bank of Nevada

Mailing Address P. O. Box 26237

City Las Vegas State NV Zip Code 89195-2843

Purpose of Disbursement

Bank Charges

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83149

Date of Disbursement

10 / 19 / 2007

Amount of Each Disbursement this Period

30.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2322.04

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Bank of Nevada

Transaction ID: D83153
Date of Disbursement

Mailing Address P. O. Box 26237

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	7	

City Las Vegas State NV Zip Code 89195-2843

Amount of Each Disbursement this Period

15.15

Purpose of Disbursement
Office Supplies & Exp.

--

Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Bank of Nevada

Transaction ID: D83106
Date of Disbursement

Mailing Address P. O. Box 26237

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	7	

City Las Vegas State NV Zip Code 89195-2843

Amount of Each Disbursement this Period

38.46

Purpose of Disbursement
Credit Card Services

--

Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Bank of Nevada

Transaction ID: D83259
Date of Disbursement

Mailing Address P. O. Box 26237

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	7	

City Las Vegas State NV Zip Code 89195-2843

Amount of Each Disbursement this Period

30.00

Purpose of Disbursement
Bank Charges

--

Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

83.61

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Brown, Teri Mailing Address 8220 Emerald Isle City Las Vegas State NV Zip Code 89128 Purpose of Disbursement Payroll Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83258 Date of Disbursement 12 / 19 / 2007 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Clark County Democratic Party Mailing Address 1785 E. Sahara Ave. City Las Vegas State NV Zip Code 89104 Purpose of Disbursement Banquets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83191 Date of Disbursement 11 / 06 / 2007 Amount of Each Disbursement this Period 7500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Clark County Democratic Party Mailing Address 1785 E. Sahara Ave. City Las Vegas State NV Zip Code 89104 Purpose of Disbursement Banquets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83193 Date of Disbursement 11 / 13 / 2007 Amount of Each Disbursement this Period 550.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

8550.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Congregation Shaarei Tefilla <hr/> Mailing Address 1331 S. Maryland Pkwy <hr/> City Las Vegas State NV Zip Code 89104 <hr/> Purpose of Disbursement Newsprint Space Purchase Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83144 Date of Disbursement 10 / 15 / 2007 <hr/> Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Corporate Management Services <hr/> Mailing Address 3069 Conquista Court <hr/> City Las Vegas State NV Zip Code 89121 <hr/> Purpose of Disbursement Accounting services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83160 Date of Disbursement 11 / 02 / 2007 <hr/> Amount of Each Disbursement this Period 1750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Corporate Management Services <hr/> Mailing Address 3069 Conquista Court <hr/> City Las Vegas State NV Zip Code 89121 <hr/> Purpose of Disbursement Accounting services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83104 Date of Disbursement 10 / 01 / 2007 <hr/> Amount of Each Disbursement this Period 1750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Corporate Management Services

Transaction ID: D83210

Mailing Address 3069 Conquista Court

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	7

City State Zip Code
Las Vegas NV 89121

Amount of Each Disbursement this Period

1750.00

Purpose of Disbursement
Accounting services

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Dickstein Shapiro Morin & Oshinsky LLP PAC

Transaction ID: D81326

Mailing Address 2101 L Street, NW

Date of Disbursement

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

City State Zip Code
Washington DC 20037-1526

Amount of Each Disbursement this Period

475.43

Purpose of Disbursement
Administrative Time

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

* in-kind received

C.

Full Name (Last, First, Middle Initial)
Embarq

Transaction ID: D83146

Mailing Address P. O. Box 79133

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

City State Zip Code
Phoenix AZ 85062-9133

Amount of Each Disbursement this Period

115.36

Purpose of Disbursement
Phones-Charges

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2340.79

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Embarq	Transaction ID: D83199 Date of Disbursement 11 / 13 / 2007
	Mailing Address P. O. Box 79133	Amount of Each Disbursement this Period 131.88
	City Phoenix State AZ Zip Code 85062-9133	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phones-Charges Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Embarq	Transaction ID: D83231 Date of Disbursement 12 / 10 / 2007
	Mailing Address P. O. Box 79133	Amount of Each Disbursement this Period 131.36
	City Phoenix State AZ Zip Code 85062-9133	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phones-Charges Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Fiorello Consulting	Transaction ID: D83208 Date of Disbursement 12 / 03 / 2007
	Mailing Address 3912 Barcroft Mews Ct.	Amount of Each Disbursement this Period 3000.00
	City Falls Church State VA Zip Code 22041	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement PAC Fundraising Consultants Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3263.24
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Fiorello Consulting	Transaction ID: D83209 Date of Disbursement 12 / 03 / 2007
	Mailing Address 3912 Barcroft Mews Ct.	Amount of Each Disbursement this Period 343.20
	City Falls Church State VA Zip Code 22041	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food, Beverage & Related Costs Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Fiorello Consulting	Transaction ID: D83159 Date of Disbursement 11 / 02 / 2007
	Mailing Address 3912 Barcroft Mews Ct.	Amount of Each Disbursement this Period 3000.00
	City Falls Church State VA Zip Code 22041	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement PAC Fundraising Consultants Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Fiorello Consulting	Transaction ID: D83100 Date of Disbursement 10 / 01 / 2007
	Mailing Address 3912 Barcroft Mews Ct.	Amount of Each Disbursement this Period 3000.00
	City Falls Church State VA Zip Code 22041	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement PAC Fundraising Consultants Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6343.20
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Geary Internet Strategies	Transaction ID: D83110 Date of Disbursement 10 / 08 / 2007
	Mailing Address 3136 E. Russell Rd.	Amount of Each Disbursement this Period 70.00
	City Las Vegas State NV Zip Code 89120	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Website Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Geary Internet Strategies	Transaction ID: D83211 Date of Disbursement 12 / 03 / 2007
	Mailing Address 3136 E. Russell Rd.	Amount of Each Disbursement this Period 145.00
	City Las Vegas State NV Zip Code 89120	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Website Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Geary Internet Strategies	Transaction ID: D83183 Date of Disbursement 11 / 02 / 2007
	Mailing Address 3136 E. Russell Rd.	Amount of Each Disbursement this Period 145.00
	City Las Vegas State NV Zip Code 89120	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Website Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	360.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A. Full Name (Last, First, Middle Initial) Geary Internet Strategies</p> <p>Mailing Address 3136 E. Russell Rd.</p> <p>City Las Vegas State NV Zip Code 89120</p> <p>Purpose of Disbursement 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83223</p> <p>Date of Disbursement 12 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 75.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Green Valley Storage</p> <p>Mailing Address 140 Gibson Rd.</p> <p>City Henderson State NV Zip Code 89014</p> <p>Purpose of Disbursement Moving & Storage</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83212</p> <p>Date of Disbursement 12 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 166.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Green Valley Storage</p> <p>Mailing Address 140 Gibson Rd.</p> <p>City Henderson State NV Zip Code 89014</p> <p>Purpose of Disbursement Moving & Storage</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83161</p> <p>Date of Disbursement 11 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 166.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

407.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial) Hadassah Southern Nevada Chapter Mailing Address 5524 Idle Ave. City Las Vegas State NV Zip Code 89107 Purpose of Disbursement Newsprint Space Purchase Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D83147 Date of Disbursement 10 / 15 / 2007
	Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial) Jewish Reporter Mailing Address 3909 S. Maryland Parkway, Suite 40 City Las Vegas State NV Zip Code 89119-7520 Purpose of Disbursement Newsprint Space Purchase Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D83148 Date of Disbursement 10 / 18 / 2007
	Amount of Each Disbursement this Period 275.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial) John Gremo Mailing Address 6375 W. Charleston Blvd. City Las Vegas State NV Zip Code 89146 Purpose of Disbursement Food, Beverage & Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D83186 Date of Disbursement 11 / 06 / 2007
	Amount of Each Disbursement this Period 800.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1575.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) John Gremo</p> <p>Mailing Address 6375 W. Charleston Blvd.</p> <p>City Las Vegas State NV Zip Code 89146</p> <p>Purpose of Disbursement Food, Beverage & Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83187</p> <p>Date of Disbursement 11 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 1200.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) John Gremo</p> <p>Mailing Address 6375 W. Charleston Blvd.</p> <p>City Las Vegas State NV Zip Code 89146</p> <p>Purpose of Disbursement Banquets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83224</p> <p>Date of Disbursement 12 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Las Vegas Academy Choir Department</p> <p>Mailing Address 315 South Seventh Street</p> <p>City Las Vegas State NV Zip Code 89101</p> <p>Purpose of Disbursement Community Activities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83227</p> <p>Date of Disbursement 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	2950.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Las Vegas Chamber of Commerce

Mailing Address 3720 Howard Hughes Parkway

City Las Vegas State NV Zip Code 89109

Purpose of Disbursement
Dues & Subscriptions
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D83222

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

295.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Latin Chamber of Commerce

Mailing Address P O Box 7500

City Las Vegas State NV Zip Code 89125

Purpose of Disbursement
Banquets
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D83155

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
NAACP

Mailing Address 3340 S. Topaz St. Ste 150

City Las Vegas State NV Zip Code 89121-3970

Purpose of Disbursement
Community Activities
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D83166

Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

385.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

930.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) NAACP	Transaction ID: D83098 Date of Disbursement 10 / 01 / 2007
	Mailing Address 3340 S. Topaz St. Ste 150	Amount of Each Disbursement this Period 500.00
	City Las Vegas State NV Zip Code 89121-3970	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Events/Dinners Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) National Democratic Club	Transaction ID: D83214 Date of Disbursement 12 / 03 / 2007
	Mailing Address 30 Ivy Street SE	Amount of Each Disbursement this Period 590.83
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food, Beverage & Related Costs Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Nevada Conference of Police & Sheriffs	Transaction ID: D83165 Date of Disbursement 11 / 02 / 2007
	Mailing Address 201 Blvd. South Suite 250	Amount of Each Disbursement this Period 250.00
	City Las Vegas State NV Zip Code 89101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Community Activities Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1340.83
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Nevada Department of Taxation

Mailing Address P.O. Box 98596

City Las Vegas State NV Zip Code 89193-8596

Purpose of Disbursement
License & Other Taxes

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83101

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Nevada Department of Taxation

Mailing Address P.O. Box 98596

City Las Vegas State NV Zip Code 89193-8596

Purpose of Disbursement
License & Other Taxes

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83111

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

196.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
NGP Software, Inc.

Mailing Address 5039 Connecticut Ave. NW Suite 1A

City Washington State DC Zip Code 20008-2056

Purpose of Disbursement
Office Equip Computers/software

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83112

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

450.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

746.50

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Nye County Democrats

Mailing Address 1201 South Highway 160 Suite 105

City Pahrump State NV Zip Code 89048

Purpose of Disbursement
Community Activities

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83189

Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Red Rock Democratic Club

Mailing Address P. O. Box 35261

City Las Vegas State NV Zip Code 89133

Purpose of Disbursement
Dues & Subscriptions

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83152

Date of Disbursement

10 / 23 / 2007

Amount of Each Disbursement this Period

30.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Renee Aschoff

Mailing Address 349 Keating Street

City Henderson State NV Zip Code 89074

Purpose of Disbursement
Finance Director-payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83142

Date of Disbursement

10 / 11 / 2007

Amount of Each Disbursement this Period

8950.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

9480.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A. Full Name (Last, First, Middle Initial) Renee Aschoff</p> <p>Mailing Address 349 Keating Street</p> <p>City Henderson State NV Zip Code 89074</p> <p>Purpose of Disbursement Finance Director-payroll</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83195</p> <p>Date of Disbursement 11 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 8950.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Renee Aschoff</p> <p>Mailing Address 349 Keating Street</p> <p>City Henderson State NV Zip Code 89074</p> <p>Purpose of Disbursement Finance Director-payroll</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83256</p> <p>Date of Disbursement 12 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 8950.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Senoras of Excellence Senores of Distinct</p> <p>Mailing Address 3167 Paintedhills Avenue</p> <p>City Las Vegas State NV Zip Code 89120-3433</p> <p>Purpose of Disbursement Banquets</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83225</p> <p>Date of Disbursement 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

18900.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Senoras of Excellence Senores of Distinct <hr/> Mailing Address 3167 Paintedhills Avenue <hr/> City Las Vegas State NV Zip Code 89120-3433 <hr/> Purpose of Disbursement Newsprint Space Purchase Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83226 Date of Disbursement 12 / 06 / 2007 <hr/> Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Texaco, Inc. <hr/> Mailing Address 1500 W. Charleston Blvd <hr/> City Las Vegas State NV Zip Code 89102 <hr/> Purpose of Disbursement Staff Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83213 Date of Disbursement 12 / 03 / 2007 <hr/> Amount of Each Disbursement this Period 273.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) The Center <hr/> Mailing Address P.O. 70481 <hr/> City Las Vegas State NV Zip Code 89170 <hr/> Purpose of Disbursement Newsprint Space Purchase Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83145 Date of Disbursement 10 / 15 / 2007 <hr/> Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	773.85
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) UNLV Alumni Association	Transaction ID: D83114 Date of Disbursement 10 / 08 / 2007
	Mailing Address 4505 S. Maryland Pkwy	Amount of Each Disbursement this Period 7500.00
	City Las Vegas State NV Zip Code 89154	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Events/Parades Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D83102 Date of Disbursement 10 / 01 / 2007
	Mailing Address P.O. Box 8808	Amount of Each Disbursement this Period 223.38
	City Little Rock State AR Zip Code 72231-8808	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phone charges Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D83103 Date of Disbursement 10 / 01 / 2007
	Mailing Address P.O. Box 8808	Amount of Each Disbursement this Period 351.94
	City Little Rock State AR Zip Code 72231-8808	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phones-Charges Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8075.32
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 8808</p> <p>City Little Rock State AR Zip Code 72231-8808</p> <p>Purpose of Disbursement Phones-Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83162</p> <p>Date of Disbursement 11 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 51.32</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 8808</p> <p>City Little Rock State AR Zip Code 72231-8808</p> <p>Purpose of Disbursement Phone charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83163</p> <p>Date of Disbursement 11 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 212.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 8808</p> <p>City Little Rock State AR Zip Code 72231-8808</p> <p>Purpose of Disbursement Phones-Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83164</p> <p>Date of Disbursement 11 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 283.80</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

547.93

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D83216 Date of Disbursement
	Mailing Address P.O. Box 8808	<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>
	City Little Rock State AR Zip Code 72231-8808	Amount of Each Disbursement this Period
	Purpose of Disbursement Phones-Charges	<input type="text" value="82.90"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D83217 Date of Disbursement
	Mailing Address P.O. Box 8808	<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>
	City Little Rock State AR Zip Code 72231-8808	Amount of Each Disbursement this Period
	Purpose of Disbursement Phones-Charges	<input type="text" value="270.53"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D83218 Date of Disbursement
	Mailing Address P.O. Box 8808	<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>
	City Little Rock State AR Zip Code 72231-8808	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone charges	<input type="text" value="217.14"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="570.57"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A. Full Name (Last, First, Middle Initial) Volunteer Center of Southern Nevada</p> <p>Mailing Address 3075 E. Flamingo Rd. Suite 100 A</p> <p>City Las Vegas State NV Zip Code 89121</p> <p>Purpose of Disbursement Community Activities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83188</p> <p>Date of Disbursement 11 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Women's Club of Summerlin</p> <p>Mailing Address P. O. Box 370686</p> <p>City Las Vegas State NV Zip Code 89137</p> <p>Purpose of Disbursement Newsprint Space Purchase</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83156</p> <p>Date of Disbursement 11 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 750.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Women's Democratic Club of Clark County</p> <p>Mailing Address 2368 Tilden Way</p> <p>City Henderson State NV Zip Code 89074</p> <p>Purpose of Disbursement Meetings & Luncheons</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83151</p> <p>Date of Disbursement 10 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 75.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1825.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
Women's Democratic Club of Clark County

Mailing Address 2368 Tilden Way

City Henderson State NV Zip Code 89074

Purpose of Disbursement
Meetings & Luncheons

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83190

Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

75.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Bank Of Nevada Card

Mailing Address P. O. Box 98809

City Las Vegas State NV Zip Code 89193

Purpose of Disbursement
Bank of Nevada Card Payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83118

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

449.53

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Safeway Stores

Mailing Address 322 40th St., NW

City Washington State DC Zip Code 20019

Purpose of Disbursement
Event costs

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83116

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

165.33

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

524.53

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial)
U. S. House of Representatives

Mailing Address 1505 Longworth H. O. B.

City Washington State DC Zip Code 20515

Purpose of Disbursement

Event costs

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83115

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

184.20

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 65 Broadway Lobby

City New York State NY Zip Code 10006

Purpose of Disbursement
American Express-credit card pmt

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83140

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

8946.68

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Amazon.com, Inc.

Mailing Address 1200 12th Avenue South Suite 1200

City Seattle State WA Zip Code 98144-2734

Purpose of Disbursement
Event costs

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83125

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

913.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

8946.68

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Bellagio Hotel & Casino

Mailing Address 3600 Las Vegas Blvd. South

City Las Vegas State NV Zip Code 89109

Purpose of Disbursement
Meetings & luncheons

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83121

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

564.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Costco Wholesale Membership

Mailing Address P.O. Box 34535

City Seattle State WA Zip Code 98124-1535

Purpose of Disbursement
Office Supplies & Exp.

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83132

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

479.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
EMS Mobile Compters

Mailing Address 6285 S. Mojave Rd.

City Las Vegas State NV Zip Code 89120

Purpose of Disbursement
Repairs & Maintenance

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83137

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

288.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial) Health Plan of Nevada Mailing Address P. O. Box 1388 City Las Vegas State NV Zip Code 89125-1388 Purpose of Disbursement Employee Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D83126 Date of Disbursement 10 / 08 / 2007 Amount of Each Disbursement this Period 4681.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Category/ Type

B. Full Name (Last, First, Middle Initial) Intuit, Inc. Mailing Address P. O. Box 34328 City Seattle State WA Zip Code 98124 Purpose of Disbursement Office Supplies & Exp. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D83127 Date of Disbursement 10 / 08 / 2007 Amount of Each Disbursement this Period 126.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Category/ Type

C. Full Name (Last, First, Middle Initial) Kinko's Copy Centers Mailing Address 4440 S. Maryland Pkwy City Las Vegas State NV Zip Code 89109 Purpose of Disbursement Office Supplies & Exp. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D83130 Date of Disbursement 10 / 08 / 2007 Amount of Each Disbursement this Period 81.89 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Locanda Restaurant

Mailing Address 633 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Meetings & luncheons

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83124

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

198.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Noras Wine Bar

Mailing Address 6020 W. Flamingo Rd.

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement
Meetings & luncheons

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83122

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

180.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Office Depot

Mailing Address 3265 E. Tropicana Ave.

City Las Vegas State NV Zip Code 89121

Purpose of Disbursement
Office Supplies & Exp.

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83131

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

75.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Terrible Herbst Gas Station	Transaction ID: D83119 Date of Disbursement 10 / 08 / 2007
	Mailing Address 306 N. Boulder Hwy	Amount of Each Disbursement this Period 483.48
	City Henderson State NV Zip Code 89015	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Staff Travel Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) U. S. Postmaster	Transaction ID: D83128 Date of Disbursement 10 / 08 / 2007
	Mailing Address 1001 East Sunset Rd.	Amount of Each Disbursement this Period 41.00
	City Las Vegas State NV Zip Code 89193	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) U. S. Postmaster	Transaction ID: D83138 Date of Disbursement 10 / 08 / 2007
	Mailing Address 1001 East Sunset Rd.	Amount of Each Disbursement this Period 261.41
	City Las Vegas State NV Zip Code 89193	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
UPS Store

Mailing Address 7500 W Lake Mead Blvd.

City Las Vegas State NV Zip Code 89128

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83136
Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

82.41

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

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

Mailing Address 65 Broadway Lobby

City New York State NY Zip Code 10006

Purpose of Disbursement
American Express-credit card pmt

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83181
Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

4374.03

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

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

Mailing Address P.O. Box 78522

City Phoenix State AZ Zip Code 85062-8522

Purpose of Disbursement
Phones-Charges

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83178
Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

170.67

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

4374.03

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Capitol Catering	Transaction ID: D83169 Date of Disbursement 11 / 02 / 2007
	Mailing Address 2316 Jefferson Davis Hwy	Amount of Each Disbursement this Period 420.75
	City Alexandria State VA Zip Code 22301	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food, Beverage & Related Costs	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Charlie Palmer Steak	Transaction ID: D83167 Date of Disbursement 11 / 02 / 2007
	Mailing Address 101 Constitution Avenue	Amount of Each Disbursement this Period 2838.00
	City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food, Beverage & Related Costs	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D83170 Date of Disbursement 11 / 02 / 2007
	Mailing Address P.O. Box 1140	Amount of Each Disbursement this Period 28.28
	City Memphis State TN Zip Code 38101-1140	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial) Office Depot Mailing Address 3265 E. Tropicana Ave. City Las Vegas State NV Zip Code 89121 Purpose of Disbursement Office Supplies & Exp. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83177 Date of Disbursement 11 / 02 / 2007
	Amount of Each Disbursement this Period 124.95
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Office Max Mailing Address 4995 S. Eastern Ave. City Las Vegas State NV Zip Code 89121 Purpose of Disbursement Office Supplies & Exp. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83171 Date of Disbursement 11 / 02 / 2007
	Amount of Each Disbursement this Period 78.63
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address 2565 Chandler Ave. City Las Vegas State NV Zip Code 89121 Purpose of Disbursement Travel expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83174 Date of Disbursement 11 / 02 / 2007
	Amount of Each Disbursement this Period 136.40
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	(Empty)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Terrible Herbst Gas Station

Mailing Address 306 N. Boulder Hwy

City Henderson State NV Zip Code 89015

Purpose of Disbursement
Staff Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83172
Date of Disbursement

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

Amount of Each Disbursement this Period

213.22

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
U. S. Airways

Mailing Address 5757 Wayne Newton Blvd.

City Las Vegas State NV Zip Code 89119

Purpose of Disbursement
Travel expenses

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83173
Date of Disbursement

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

Amount of Each Disbursement this Period

200.30

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
UPS Store

Mailing Address 7500 W Lake Mead Blvd.

City Las Vegas State NV Zip Code 89128

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83176
Date of Disbursement

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

Amount of Each Disbursement this Period

68.61

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Bank of Nevada

Mailing Address P. O. Box 26237

City Las Vegas State NV Zip Code 89195-2843

Purpose of Disbursement
Bank of Nevada Card Payment
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: D83204
Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

909.32

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Smart & Final

Mailing Address 1435 E. Tropicana Ave.

City Las Vegas State NV Zip Code 89109

Purpose of Disbursement
Event costs
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: D83202
Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

183.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
U. S. Capitol Historical Society

Mailing Address 200 Maryland Ave. NE

City Washinton State DC Zip Code 20001

Purpose of Disbursement
Event costs
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: D83203
Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

297.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

909.32

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) U. S. House of Representatives	Transaction ID: D83201 Date of Disbursement 11 / 13 / 2007
	Mailing Address 1505 Longworth H. O. B.	Amount of Each Disbursement this Period 373.52
	City Washington State DC Zip Code 20515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Meetings & luncheons Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bank of Nevada	Transaction ID: D83234 Date of Disbursement 12 / 11 / 2007
	Mailing Address P. O. Box 26237	Amount of Each Disbursement this Period 234.65
	City Las Vegas State NV Zip Code 89195-2843	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Bank of Nevada Card Payment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Hadassah Southern Nevada Chapter	Transaction ID: D83232 Date of Disbursement 12 / 11 / 2007
	Mailing Address 5524 Idle Ave.	Amount of Each Disbursement this Period 200.00
	City Las Vegas State NV Zip Code 89107	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Community Activities Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	234.65
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address 65 Broadway Lobby</p> <p>City New York State NY Zip Code 10006</p> <p>Purpose of Disbursement American Express-credit card pmt</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83254</p> <p>Date of Disbursement 12 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 5788.34</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 10 G Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83235</p> <p>Date of Disbursement 12 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 229.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address P.O. Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D83241</p> <p>Date of Disbursement 12 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 25.01</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5788.34

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A. Full Name (Last, First, Middle Initial) Health Plan of Nevada Mailing Address P. O. Box 1388 City Las Vegas State NV Zip Code 89125-1388 Purpose of Disbursement Employee Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83240 Date of Disbursement 12 / 11 / 2007
	Amount of Each Disbursement this Period 2340.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Jewish Women International Mailing Address 2000 M Street Suite 720 City Washington State DC Zip Code 20036 Purpose of Disbursement Site Rental & Related Costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83247 Date of Disbursement 12 / 11 / 2007
	Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Kelly Paper Mailing Address 5800 S. Valley View City Las Vegas State NV Zip Code 89118 Purpose of Disbursement Printing, Postage & Handling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83244 Date of Disbursement 12 / 11 / 2007
	Amount of Each Disbursement this Period 114.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Leadership Institute

Mailing Address 888 17th Street, NW Suite 302

City Washington State DC Zip Code 20006

Purpose of Disbursement
Community Activities

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83242

Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

350.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Locanda Restaurant

Mailing Address 633 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Meetings & luncheons

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83237

Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

49.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Office Depot

Mailing Address 3265 E. Tropicana Ave.

City Las Vegas State NV Zip Code 89121

Purpose of Disbursement
Office Supplies & Exp.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83248

Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

586.82

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.	Full Name (Last, First, Middle Initial) Office Max	Transaction ID: D83251 Date of Disbursement 12 / 11 / 2007
	Mailing Address 4995 S. Eastern Ave.	Amount of Each Disbursement this Period 246.24
	City Las Vegas State NV Zip Code 89121	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Supplies & Exp.	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Red Top Executive Sedan	Transaction ID: D83238 Date of Disbursement 12 / 11 / 2007
	Mailing Address 1200 North Hudson Street	Amount of Each Disbursement this Period 59.51
	City Arlington State VA Zip Code 22201	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel expenses	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Terrible Herbst Gas Station	Transaction ID: D83253 Date of Disbursement 12 / 11 / 2007
	Mailing Address 306 N. Boulder Hwy	Amount of Each Disbursement this Period 96.00
	City Henderson State NV Zip Code 89015	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Staff Travel	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
U. S. Postmaster

Mailing Address 1001 East Sunset Rd.

City Las Vegas State NV Zip Code 89193

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83250
Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

103.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
W. Millar & Co. Catering

Mailing Address 1335 14th St. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Food, Beverage & Related Costs

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83236
Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

646.37

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

115463.58

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

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

FOR LINE NUMBER:
(check only one)

PAGE 97 / 100

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input checked="" type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
National Surgical Hospitals Pac

Mailing Address 30 South Wacker Dr., Ste 2302

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Refund of excess contributions

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D83205

Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

2500.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Biden for President, Inc.

Transaction ID: D83099

Mailing Address P. O. Box 438

Date of Disbursement

/ /

City Wilmington State DE Zip Code 19899

Amount of Each Disbursement this Period

Purpose of Disbursement
Federal Candidate Contribution

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name
Joseph R. Biden, Jr.

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committ

Transaction ID: D83157

Mailing Address 499 South Capitol Street SW Att

Date of Disbursement

/ /

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
Excess campaign funds

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Heath Shuler for Congress

Transaction ID: D83261

Mailing Address P. O. Box 97

Date of Disbursement

/ /

City Hazelwood State NC Zip Code 28738

Amount of Each Disbursement this Period

Purpose of Disbursement
Federal Candidate Contribution

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name
Heath Shuler

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: NC District: 11

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
John Edwards for President

Transaction ID: D81980
Date of Disbursement

Mailing Address 410 Market Street
Suite 400

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	7

City State Zip Code
Chapel Hill NC 27516

Amount of Each Disbursement this Period

-1000.00

Purpose of Disbursement
Check never cashed

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name
John Edwards

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Nevada Democratic Caucus

Transaction ID: D83192
Date of Disbursement

Mailing Address 1210 S. Valley View Blvd. Suite 11

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	0	7

City State Zip Code
Las Vegas NV 89102

Amount of Each Disbursement this Period

50000.00

Purpose of Disbursement
Excess campaign funds

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

C.

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

Transaction ID: D83182
Date of Disbursement

Mailing Address 65 Broadway Lobby

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

City State Zip Code
New York NY 10006

Amount of Each Disbursement this Period

25000.00

Purpose of Disbursement
American Express-credit card pmt

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

74000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 100 / 100

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Berkley For Congress

A.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committ

Transaction ID: D83180

Date of Disbursement

Mailing Address 499 South Capitol Street SW Att

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

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

25000.00

Purpose of Disbursement
Excess campaign funds

--

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

151000.00
