

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Forward Together PAC

ADDRESS (number and street) 201 North Union Street
Suite 300
Alexandria VA 22314

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00412791

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|---|--------------------------------------|---------------------------------------|--|
| <input checked="" type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 01 01 2010 through 01 31 2010

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 Honorable Gerald S McGowan

Signature of Treasurer Electronically Filed by Honorable Gerald S McGowan Date 06 14 2010

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

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

A. Form/Schedule : **F3XA**

Transaction ID :

June 14, 2010 Ms. Sylvette S. Garnes Senior Campaign Finance Analyst Reports Analysis Division
Federal Election Commission 999 E Street, NW Washington, DC 20463 ID NUMBER: C00412791 REFERENC-
E: February Monthly Report (01/01/2010-01/31/2010) Dear Ms. Garnes: In regards to your letter dat-
ed June 9, 2010, please be advised that Schedule B supporting Line 21(b) for the payments made to the
credit card companies do have the necessary identified memo entries reported correctly. Also be adv-
ised that none of the expenditures made by the Committee for Fundraising Consulting Services and Cat-
tering/Events on Schedule B were made on behalf of federal candidates. All the referenced expenditur-
es were fundraising expenditures made to raise funds for the Committee. Please call Katie Buchanan
at (202) 423-4742 if you have further questions regarding these matters. Sincerely, Gerald S. McGow-
an, Treasurer

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Forward Together PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		889763.37
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	889763.37									
(c) Total Receipts (from Line 19)	24672.52	24672.52								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	914435.89	914435.89								
7. Total Disbursements (from Line 31)	73562.82	73562.82								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	840873.07	840873.07								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Forward Together PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	21000.00	21000.00
(ii) Unitemized	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	21100.00	21100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	3500.00	3500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	24600.00	24600.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	72.52	72.52
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	24672.52	24672.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24672.52	24672.52

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	58562.82	58562.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	58562.82	58562.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	7500.00	7500.00
(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 28(a), (b), and (c))	10000.00	10000.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	73562.82	73562.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	73562.82	73562.82

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	24600.00	24600.00
34. Total Contribution Refunds (from Line 28(d))	10000.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14600.00	14600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	58562.82	58562.82
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	58562.82	58562.82

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Linda Forbes	Date of Receipt MM / DD / YYYY 01 / 04 / 2010
	Mailing Address 3507 Idaho Ave NW	Transaction ID: C2566711
	City State Zip Code Washington DC 20016-3151	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer US Senate Occupation Snr. Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 2500.00	

B.	Full Name (Last, First, Middle Initial) Michael W. Kempner	Date of Receipt MM / DD / YYYY 01 / 04 / 2010
	Mailing Address 378 E Madison Ave	Transaction ID: C2566710
	City State Zip Code Cresskill NJ 07626-1742	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer The MWW Group Occupation President/CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 2500.00	

C.	Full Name (Last, First, Middle Initial) Pablo G. Legorreta	Date of Receipt MM / DD / YYYY 01 / 07 / 2010
	Mailing Address 119 E 79th St	Transaction ID: C2568019
	City State Zip Code New York NY 10075-0339	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Royalty Pharma Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 5000.00	

SUBTOTAL of Receipts This Page (optional)	10000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial)

Ted Leonsis

Mailing Address 6827 Sorrell St

City State Zip Code
McLean VA 22101-1527

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

Name of Employer Occupation
Lincoln Holdings Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: C2569603

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)

Christopher B. Rivers

Mailing Address 2100 Stuart Ave

City State Zip Code
Richmond VA 23220-3440

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

Name of Employer Occupation
Dominion Resources Executive

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

Date of Receipt

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

Transaction ID: C2571057

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)

Blaine Wesner

Mailing Address 900 Live Oak Cir

City State Zip Code
West Lake Hills TX 78746-3522

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

Name of Employer Occupation
Austin Ventures Venture Capitalist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: C2569602

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

21000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 21
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial) Hogan & Hartson PAC		Date of Receipt
Mailing Address 555 13th St NW West Tower, 8th Floor		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
City	State	Zip Code
Washington	DC	20004-1109
FEC ID number of contributing federal political committee.		Transaction ID: C2574232
<input type="text" value="C"/> <input type="text" value="C00261339"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1000.00"/>
Occupation		
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Oracle USA, Inc. PAC		Date of Receipt
Mailing Address 1015 15th St NW Suite 200		<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
City	State	Zip Code
Washington	DC	20005-2635
FEC ID number of contributing federal political committee.		Transaction ID: C2571056
<input type="text" value="C"/> <input type="text" value="C00323048"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="2500.00"/>
Occupation		
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D192270 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="01"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="413.67"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D192271 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="01"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Service Charge	<input type="text" value="78.93"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D192416 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="01"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Service Charge	<input type="text" value="7.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="499.60"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D194268 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Service Charge	<input type="text" value="78.93"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D194269 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="413.67"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ANobleworld S3, Inc.	Transaction ID: D191272 Date of Disbursement
	Mailing Address 201 N Union St Ste 300	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314-2650	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer Services	<input type="text" value="600.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1092.60"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Campaign Finance Consultants	Transaction ID: D192664 Date of Disbursement
	Mailing Address 10 G St NE Ste 470	<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20002-8038	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Consulting Services Candidate Name	<input type="text" value="3323.25"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="003"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) CareFirst BlueCross BlueShield	Transaction ID: D192128 Date of Disbursement
	Mailing Address PO Box 79749	<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Baltimore State MD Zip Code 21279-0749	Amount of Each Disbursement this Period
	Purpose of Disbursement Insurance Candidate Name	<input type="text" value="459.59"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Columbia Capital, LLC	Transaction ID: D185009 Date of Disbursement
	Mailing Address 201 N Union St STE 300	<input type="text" value="01"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314-2650	Amount of Each Disbursement this Period
	Purpose of Disbursement Rent Candidate Name	<input type="text" value="643.36"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4426.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

<p>A. Full Name (Last, First, Middle Initial) Funding Solutions, LLC</p> <p>Mailing Address 18 Ensign Spence</p> <p>City Williamsburg State VA Zip Code 23185-5561</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D194273</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="4459.72"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p>B. Full Name (Last, First, Middle Initial) Katherine Buchanan</p> <p>Mailing Address 20 W Maple St</p> <p>City Alexandria State VA Zip Code 22301-2604</p> <p>Purpose of Disbursement Accounting/Compliance Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D192039</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="1875.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Andrew M. Smith</p> <p>Mailing Address 1410 N Scott St Apt 949</p> <p>City Arlington State VA Zip Code 22209-2982</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D192269</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="1119.57"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) PingTone Communications	Transaction ID: D185005 Date of Disbursement
	Mailing Address 13921 Park Center Rd 1st Floor	<input type="text" value="01"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Herndon State VA Zip Code 20171-3236	Amount of Each Disbursement this Period
	Purpose of Disbursement Internet Service Candidate Name	<input type="text" value="66.30"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) PingTone Communications	Transaction ID: D191744 Date of Disbursement
	Mailing Address 13921 Park Center Rd 1st Floor	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Herndon State VA Zip Code 20171-3236	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Candidate Name	<input type="text" value="211.32"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Republic Parking System	Transaction ID: D190948 Date of Disbursement
	Mailing Address 108 N Fairfax St	<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314-3224	Amount of Each Disbursement this Period
	Purpose of Disbursement Parking Candidate Name	<input type="text" value="217.50"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="495.12"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Republic Parking System	Transaction ID: D194023 Date of Disbursement
	Mailing Address 108 N Fairfax St	<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314-3224	Amount of Each Disbursement this Period
	Purpose of Disbursement Parking Candidate Name	<input type="text" value="108.75"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Verizon Conferencing	Transaction ID: D191275 Date of Disbursement
	Mailing Address PO Box 70129	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60673-0129	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Candidate Name	<input type="text" value="2642.12"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Wachovia, NA	Transaction ID: D195193 Date of Disbursement
	Mailing Address 301 N Washington St	<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314-2501	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Fees Candidate Name	<input type="text" value="3354.90"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6105.77"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Wachovia, NA Mailing Address 301 N Washington St City Alexandria State VA Zip Code 22314-2501 Purpose of Disbursement Commercial Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D195194 Date of Disbursement 01 / 12 / 2010 Amount of Each Disbursement this Period 18.23 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270 City Newark State NJ Zip Code 07101-1270 Purpose of Disbursement Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D192124 Date of Disbursement 01 / 22 / 2010 Amount of Each Disbursement this Period 35709.86 Category/ Type
C.	Full Name (Last, First, Middle Initial) US Postmaster Mailing Address 1100 Wythe St City Alexandria State VA Zip Code 22314-1843 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D192127 Date of Disbursement 01 / 08 / 2010 Amount of Each Disbursement this Period 391.15 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

35728.09

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

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

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A. Full Name (Last, First, Middle Initial) W Washington DC Mailing Address 515 15th St NW City Washington State DC Zip Code 20004-1006 Purpose of Disbursement Catering/Events Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D192126 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 34818.71 [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Wired For Change Mailing Address 1700 Connecticut Ave NW City Washington State DC Zip Code 20009-1134 Purpose of Disbursement Website Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D192125 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	58187.82

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

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial)
Carnahan in Congress

Mailing Address 7370 Manchester Rd
Ste 20

City Saint Louis State MO Zip Code 63143-3105

Purpose of Disbursement
Contribution

Candidate Name
Russ Carnahan

Office Sought: House
 Senate
 President
State: MO District: 03

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: D191738
Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00

011
Category/
Type

B.

Full Name (Last, First, Middle Initial)
Martha Coakley For Senate Committee

Mailing Address PO Box 220

City Boston State MA Zip Code 02133-0220

Purpose of Disbursement
Contribution

Candidate Name
Martha Coakley

Office Sought: House
 Senate
 President
State: MA District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼
Special

Transaction ID: D192626
Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

5000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.

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

Mailing Address 6374 Dockser Ter

City Falls Church State VA Zip Code 22041-1305

Purpose of Disbursement
Refund Exceeded 2009 Limit

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D192376
Date of Disbursement

01 / 13 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Mr. John L. Davies

Mailing Address 3618 Prospect Street, NW

City Washington State DC Zip Code 20007-2633

Purpose of Disbursement
Refund Exceeded 2009 Limit

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D192375
Date of Disbursement

01 / 13 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

7500.00

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

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial)
Thelen Reid Brown Raysman & Steiner PAC

Transaction ID: D192374

Date of Disbursement

Mailing Address 701 8th St NW
Ste 800

^M 0	^M 1	/	^D 1	^D 3	/	^Y 2	^Y 0	^Y 1	^Y 0
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City Washington State DC Zip Code 20001-3854

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Refund 2009 Contribution Limit

010
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

2500.00
