

# 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  
Democratic State Central Committee of Maryland

ADDRESS (number and street) 188 Main Street, Suite 1  
 Check if different than previously reported. (ACC)  
Annapolis MD 21401

2. **FEC IDENTIFICATION NUMBER** C00141812  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on 11 07 2006 in the State of MD  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 10 01 2006 through 10 18 2006

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 Kenneth Banks

Signature of Treasurer Electronically Filed by Kenneth Banks Date 10 26 2006

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  
Democratic State Central Committee of Maryland

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		55063.43
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	604410.76									
(c) Total Receipts (from Line 19) .....	1459535.63	4163306.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2063946.39	4218369.45								
7. Total Disbursements (from Line 31) .....	1291727.76	3446150.82								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	772218.63	772218.63								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Democratic State Central Committee of Maryland

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

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	155160.00	716720.53
(i) Itemized (use Schedule A) .....	33376.82	412506.04
(ii) Unitemized .....		
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	188536.82	1129226.57
(b) Political Party Committees .....	0.00	55000.00
(c) Other Political Committees (such as PACs) .....	35000.00	151100.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	223536.82	1335326.57
12. Transfers From Affiliated/Other Party Committees .....	1117000.00	2199734.80
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) .....	1749.00	19225.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	77.03
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	117249.81	608942.62
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	117249.81	608942.62
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1459535.63	4163306.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1342285.82	3554363.40

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	36119.09	236438.18
(ii) Non-Federal Share.....	135879.03	810669.07
(b) Other Federal Operating Expenditures.....	57968.25	274834.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	229966.37	1321942.02
22. Transfers to Affiliated/Other Party Committees.....	2000.00	5600.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
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).....	637000.00	637000.00
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 .....	6000.00	8500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	6000.00	8500.00
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 .....	416761.39	1473108.80
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	416761.39	1473108.80
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1291727.76	3446150.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	1155848.73	2635481.75

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	223536.82	1335326.57
34. Total Contribution Refunds (from Line 28(d)) .....	6000.00	8500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	217536.82	1326826.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	94087.34	511272.95
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1749.00	19225.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	92338.34	492047.95

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 205		
	<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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Bartholomew Acocella

Mailing Address 4866 Chevy Chase Blvd

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer self Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 6

Transaction ID: C74620

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Deborah Adams

Mailing Address 670 Hendler Road

City State Zip Code  
Severna Park MD 21146

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

Name of Employer self Occupation  
physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 6

Transaction ID: C73042

Amount of Each Receipt this Period  
300.00

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

Mailing Address 4215 Harbour Town Drive

City State Zip Code  
Beltsville MD 20705

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: C73021

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Ura Bailey</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 517 Ellworth Drive		<b>Transaction ID: C73026</b>	
City State Zip Code Silver Spring MD 20910		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Howard University Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Paul Berman</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 13808 Ivywood Lane		<b>Transaction ID: C73902</b>	
City State Zip Code Silver Spring MD 20904		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Covington & Burling Lawyer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Maurice Bolmer</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 8909 Wooden Bridge Road		<b>Transaction ID: C73845</b>	
City State Zip Code Potomac MD 20854		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation self writer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 205						
	(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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> Robin Boltz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6	
Mailing Address 14332 Howard Road		Transaction ID: C74573	
City State Zip Code Dayton MD 21036		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation URAC R.N.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Marta Brenden		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 419 Mansfield Road		Transaction ID: C74230	
City State Zip Code Silver Spring MD 20910		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation HHSIACF Management Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mary Catherine Bunting		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6	
Mailing Address 6506 Darnall Road		Transaction ID: C73789	
City State Zip Code Towson MD 21204		Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3950.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 205		
	<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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Charles L Burt</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 210 1/2 E Montgomery Street		<b>Transaction ID: C73011</b>	
City State Zip Code Baltimore MD 21230		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PGCPs Occupation educator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 423.00	

Full Name (Last, First, Middle Initial) <b>B. Roger Burt</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6	
Mailing Address 310 Cleveland Road		<b>Transaction ID: C72946</b>	
City State Zip Code Saint Michaels MD 21663		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer self Occupation Publisher			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. V P Chandar</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 9812 Korman Court		<b>Transaction ID: C72929</b>	
City State Zip Code Potomac MD 20854		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Doctor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5375.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Stephen Charles</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 8009 Merry Oaks Lane		<b>Transaction ID: C73879</b>	
City State Zip Code Vienna VA 22182	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer TelmmixGroup Inc.	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Melvin S. Cohen</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 8910 Fernwood Road		<b>Transaction ID: C73882</b>	
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer District Photo	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Suzanne F. Cohen</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 2 Wyndhurst Avenue		<b>Transaction ID: C73855</b>	
City State Zip Code Baltimore MD 21210	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Activist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	13000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 11 / 205  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Mr. William Connelly

Mailing Address 5665 Harpers Farm Road #E

City State Zip Code  
Columbia MD 21044

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 6

**Transaction ID: C73891**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Joanna Conti

Mailing Address 1527 Shipsview Road

City State Zip Code  
Annapolis MD 21409

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

Name of Employer requested Occupation requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

**Transaction ID: C73017**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Susan Coomer

Mailing Address 5017 Norrisville Road

City State Zip Code  
White Hall MD 21161

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

Name of Employer REI Occupation a

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 6

**Transaction ID: C73821**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Ms. Barbara Crain

Mailing Address 5 Lochwynd Court

City Phoenix State MD Zip Code 21131

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

Name of Employer JHU Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 0 / 2 0 0 6

**Transaction ID: C74254**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Reginald Daniel

Mailing Address 12707 Longwater Drive

City Mitchellville State MD Zip Code 20721

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

Name of Employer Scientific & Engineery So-lutions Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 6

**Transaction ID: C73826**

Amount of Each Receipt this Period  
10000.00

**C.** Full Name (Last, First, Middle Initial)  
William Danielczyk

Mailing Address 9424 Beauregard Avenue

City Manassas State VA Zip Code 20110

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

Name of Employer Galen Capital Group LLC Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 0 / 2 0 0 6

**Transaction ID: C73795**

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>12100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Lynne E Davidson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 144 Lafayette Avenue		<b>Transaction ID:</b> C73036	
City State Zip Code Annapolis MD 21401	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> David DeJong		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6	
Mailing Address 9809 Juniper Hill Road		<b>Transaction ID:</b> C73001	
City State Zip Code Rockville MD 20850	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Stein Sperling Bernett	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Georganne Derick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
Mailing Address 11450 Little Patuxent Parkway		<b>Transaction ID:</b> C74564	
City State Zip Code Columbia MD 21044	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation ORESIDENT OF INTERIOR DESIGN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A.</b> Full Name (Last, First, Middle Initial) Frank Derwin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 216 Rock Ridge Road		<b>Transaction ID:</b> C73029
City State Zip Code Millersville MD 21108	Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Intelligent Decision	Occupation management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Julie Dobson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 12617 Greenbriar Road		<b>Transaction ID:</b> C73916
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Walter Dolata		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 5315 Kenwood Avenue		<b>Transaction ID:</b> C74624
City State Zip Code Baltimore MD 21206	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation RETIRED FROM GM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> Joanne Dorval		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 5135 Woodmire Lane		<b>Transaction ID:</b> C73796	
City State Zip Code Alexandria VA 22311	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LSI: A METCOR Company	Occupation VP Administration		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Judith Eagle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 501 West Gordon Street		<b>Transaction ID:</b> C73028	
City State Zip Code Bel Air MD 21014	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Law Office of Judith Eagle	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Catherine Eckford		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 7928 Citadel Drive		<b>Transaction ID:</b> C74392	
City State Zip Code Severn MD 21144	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> W. Neil Eggleston		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address 4213 Rosemary Street		<b>Transaction ID:</b> C73877
City State Zip Code Chevy Chase MD 20815	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Howrey Simon Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

Full Name (Last, First, Middle Initial) <b>B.</b> Robert Feinberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 8014 Greentree Road		<b>Transaction ID:</b> C73894
City State Zip Code Bethesda MD 20817	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
Name of Employer Occupation Retired Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

Full Name (Last, First, Middle Initial) <b>C.</b> Ira Feldman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address 7523 Bradley Blvd		<b>Transaction ID:</b> C73878
City State Zip Code Bethesda MD 20817	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00
Name of Employer Occupation self attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Daniel Fischer</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 3609 Underwood Street		<b>Transaction ID: C73822</b>	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Solve It Group LLC	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Jacqueline Fischer</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6	
Mailing Address 15205 Watergate Road		<b>Transaction ID: C73912</b>	
City State Zip Code Silver Spring MD 20905	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Naval Research Lab	Occupation Astrophysicist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C. Marc Fleischaker</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6	
Mailing Address 6308 Broad Branch Road		<b>Transaction ID: C73785</b>	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Arent Fox	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Susan Forlifer</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6	
Mailing Address 27193 Baileys Neck Road		<b>Transaction ID: C72948</b>	
City State Zip Code Easton MD 21601	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer self Occupation surgeon	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Debra Fortier</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 207 Norwood Road		<b>Transaction ID: C73037</b>	
City State Zip Code Annapolis MD 21401	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Coldwell Banker Occupation Realtor	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Eric Francis</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 5018 College Avenue		<b>Transaction ID: C73816</b>	
City State Zip Code College Park MD 20740	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CBMC Occupation Chairman	Aggregate Year-to-Date ▼ 3000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> Angela Frazier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 708 Chillium Road # 102		<b>Transaction ID:</b> C73025
City Hyattsville	State MD	Zip Code 20783
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer DHS	Occupation Human Service Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Charlotte Fryling		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6
Mailing Address 28338 Old Country Club Road		<b>Transaction ID:</b> C72943
City Easton	State MD	Zip Code 21601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer self	Occupation Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Elizabeth V Geise		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address 4021 Glenrose Street		<b>Transaction ID:</b> C74223
City Kensington	State MD	Zip Code 20895
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Goodwin Proctor self	Occupation Partner / Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Jared Genser</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 9723 Whitley Park Place		<b>Transaction ID: C73817</b>
City <b>Bethesda</b>	State <b>MD</b>	Zip Code <b>20814</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer DLA Piper LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Gregory Gill</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 11100 Brookes Reserve Road		<b>Transaction ID: C73899</b>
City <b>Upper Marlboro</b>	State <b>MD</b>	Zip Code <b>20772</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer Cassidy & Assoc	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>550.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Louis Gitomer</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address 118 Sunny Meadow Lane		<b>Transaction ID: C73852</b>
City <b>Reisterstown</b>	State <b>MD</b>	Zip Code <b>21136</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer Law offices of Louis Gitomer	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 205		
	<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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Janet Goldberg

Mailing Address 4722 Frederick Avenue

City State Zip Code  
Shady Side MD 20764

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 6

**Transaction ID: C73784**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Jamie Gorelick

Mailing Address 3713 Williams Lane

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer WilmerHale Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 6

**Transaction ID: C73903**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Matthew Gorman

Mailing Address 4851 Bayard Blvd

City State Zip Code  
Bethesda MD 20816

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

Name of Employer Fabiani & Company Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 0 / 2 0 0 6

**Transaction ID: C73918**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Deborah Harmon

Mailing Address 1650 Tysons Blvd # 1600

City State Zip Code  
McLean VA 22102

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

Name of Employer Occupation  
JE Robert Companies President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 17 / 2006

**Transaction ID: C73881**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ruth Harvey

Mailing Address 9519 Milstead Drive

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 03 / 2006

**Transaction ID: C74450**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Ruth Harvey

Mailing Address 9519 Milstead Drive

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 07 / 2006

**Transaction ID: C74652**

Amount of Each Receipt this Period  
40.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1065.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 23 / 205  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Ruth Harvey  
 Mailing Address 9519 Milstead Drive  
 City State Zip Code  
Bethesda MD 20817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
retired retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 290.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 1 0 / 2 0 0 6  
**Transaction ID: C74451**  
 Amount of Each Receipt this Period  
 25.00

**B.** Full Name (Last, First, Middle Initial)  
Mary Headridge  
 Mailing Address 753 Gist Road  
 City State Zip Code  
Westminster MD 21157  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
RETIRE  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 0 3 / 2 0 0 6  
**Transaction ID: C74376**  
 Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Richard Henning  
 Mailing Address 8701 Berwick Place N  
 City State Zip Code  
Jiamsville MD 21754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
SELF EDUCATOR  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 1 4 / 2 0 0 6  
**Transaction ID: C74645**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1125.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John R Hess		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 5606 Oak Place		<b>Transaction ID:</b> C74286	
City State Zip Code Bethesda MD 20817		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self / U of Maryland, School of Me Occupation Physician / Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Edythe Hill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 315 Bryants Nursery Road		<b>Transaction ID:</b> C74184	
City State Zip Code Silver Spring MD 20905		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Alice H Hissey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 8714 Crestmont Lane		<b>Transaction ID:</b> C74425	
City State Zip Code Laurel MD 20708		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer University of MD Medical System Occupation Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 575.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Alice H Hissey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 8714 Crestmont Lane		<b>Transaction ID:</b> C73024	
City State Zip Code Laurel MD 20708	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of MD Medical System	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John Holland		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 111 Saint Albans Way		<b>Transaction ID:</b> C73981	
City State Zip Code Baltimore MD 21212	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation Psychologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Nina R. Houghton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6	
Mailing Address PO Box 6		<b>Transaction ID:</b> C72776	
City State Zip Code Queenstown MD 21658	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	10650.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. David Hunter</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 7509 Hancock Avenue		<b>Transaction ID: C74373</b>	
City State Zip Code Takoma Park MD 20912	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer American University	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>B. Steven R Hursh</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 41 Haviland Mill Road		<b>Transaction ID: C74226</b>	
City State Zip Code Brookeville MD 20833	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer John Hopkins	Occupation Professor PHD		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) <b>C. Lisa Jacobson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 16436 Tomahawk Drive		<b>Transaction ID: C73022</b>	
City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer ESSEX CORPORATION	Occupation CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Donna Jefferson

Mailing Address 13 Southgate Avenue

City State Zip Code  
Annapolis MD 21401

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

Name of Employer Chesapeake Family Magazine  
Occupation Publisher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 6

**Transaction ID: C73035**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Edward H. Kaplan

Mailing Address 1000 Connecticut Avenue NW Suite 1

City State Zip Code  
Washington DC 20036

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

Name of Employer Self  
Occupation Self

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 6

**Transaction ID: C73884**

Amount of Each Receipt this Period  
6000.00

**C.** Full Name (Last, First, Middle Initial)  
Irene Kaplan

Mailing Address 1108 Tara Road

City State Zip Code  
Potomac MD 20854

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

Name of Employer  
Occupation homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 6

**Transaction ID: C73883**

Amount of Each Receipt this Period  
10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	16250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 205		
	<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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sharon Karr

Mailing Address 7403 Springfield Avenue

City State Zip Code  
Sykesville MD 21784

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

Name of Employer Occupation  
Carroll county Public Schools Teacher

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 6

Transaction ID: C73000

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas Karr

Mailing Address 2950 Van Ness Street NW #618

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation  
Self Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: C73019

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Linda Kessler

Mailing Address 150K Street NW Suite 350

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation  
LSI Metcor Company President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 0 / 2 0 0 6

Transaction ID: C73797

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> Matther Koll		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6	
Mailing Address 6912 Nevis Road		Transaction ID: C73803	
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Revolution H	Occupation Internet Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Iris Krasnow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 1608 North Winchester Road		Transaction ID: C73040	
City State Zip Code Annapolis MD 21401	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer self	Occupation author		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Alan Kraut		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 8803 Cord Circle		Transaction ID: C74429	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer American University	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 205
	(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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Terry Kullback</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 6	
Mailing Address 11410 Strand Drive # 9		<b>Transaction ID: C74563</b>	
City State Zip Code Rockville MD 20852	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>B. Ernest Kyger</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 6	
Mailing Address 18102 Windsor Hill Drive		<b>Transaction ID: C74582</b>	
City State Zip Code Olney MD 20832	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer VANMETER HOMES	Occupation SALES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. John P. Kyle</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 6201 Clearwood Road		<b>Transaction ID: C73887</b>	
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer retired	Occupation retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2745.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 31 / 205  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Zena Lerman

Mailing Address PO Box 35

City State Zip Code  
Oxford MD 21654

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 6

**Transaction ID: C72949**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Harry Letaw, Jr

Mailing Address 440 Severnside Drive

City State Zip Code  
Severna Park MD 21146

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3150.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 6

**Transaction ID: C73038**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Harry Letaw, Jr

Mailing Address 440 Severnside Drive

City State Zip Code  
Severna Park MD 21146

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3150.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

**Transaction ID: C73027**

Amount of Each Receipt this Period  
500.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Harry Letaw, Jr</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 440 Severnside Drive		<b>Transaction ID: C73851</b>	
City State Zip Code Severna Park MD 21146		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation retired retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3150.00	

Full Name (Last, First, Middle Initial) <b>B. Walter Ludwig</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 314 West Cold Spring Lane		<b>Transaction ID: C73897</b>	
City State Zip Code Baltimore MD 21210		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Project 90 Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Amanda Mahoney</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 13634 Longnecker Road		<b>Transaction ID: C73794</b>	
City State Zip Code Glyndon MD 21071		Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self activist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Timothy Isham Mann</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 8734 Carriage Hills Drive		<b>Transaction ID: C74428</b>	
City State Zip Code Columbia MD 21046		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Requested Occupation Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Dennis McCoy</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 230 Prince George Street		<b>Transaction ID: C73793</b>	
City State Zip Code Annapolis MD 21401		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer McCoy & Assoc Occupation Lobbyist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Stephen McHale</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 10314 Armory Avenue		<b>Transaction ID: C73823</b>	
City State Zip Code Kensington MD 20895		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Patton Boggs LLP Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. John Mcintire</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6	
Mailing Address 9309 Friars Road		<b>Transaction ID: C73800</b>	
City State Zip Code Bethesda MD 20817		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation THE WORLD BANK Senior Advisor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. W. Bruce McPherson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6	
Mailing Address 10800 Linson Road		<b>Transaction ID: C73782</b>	
City State Zip Code Owings Mills MD 21117		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Requested Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Doris Meissner</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 4619 Derussy Parkway		<b>Transaction ID: C73886</b>	
City State Zip Code Chevy Chase MD 20815		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Immigration Policy Institute Analyst			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 205
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Sally A Moody</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 11901 Goya Drive		<b>Transaction ID: C74006</b>	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer George Washington University	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Linda Morgan</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 6206 Newburn Drive		<b>Transaction ID: C73792</b>	
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Corington & Burling	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00		

Full Name (Last, First, Middle Initial) <b>C. James Muldoon</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 1500 K Street NW, Suite 350		<b>Transaction ID: C73798</b>	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Metcor	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 36 / 205  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Lois Natusch

Mailing Address 5305 Bradley Blvd

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Retired Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 6

**Transaction ID: C74276**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
John North

Mailing Address PO Box 479

City State Zip Code  
Easton MD 21601

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

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 6

**Transaction ID: C72944**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Abies Oboh

Mailing Address 18704 Old Baltimore Road

City State Zip Code  
Brookeville MD 20833

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

**Transaction ID: C73018**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> John O'brien		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 6	
Mailing Address 113 Oak Drive		<b>Transaction ID:</b> C74562	
City State Zip Code Baltimore MD 21228		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer UNMB Occupation HEALTHCARE POLICY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Joyce Olin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 212 Norwood Road		<b>Transaction ID:</b> C73039	
City State Zip Code Annapolis MD 21401		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer retired Occupation retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John F Olson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 3719 Bradley Lane		<b>Transaction ID:</b> C73859	
City State Zip Code Chevy Chase MD 20815		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Gibson Dunn & Crutch Occupation Lawyer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Sally Parker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
Mailing Address 8614 Meadowsweet Court		<b>Transaction ID:</b> C74644	
City State Zip Code Columbia MD 21045		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer northrop grumman Occupation software engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Carol Pensky		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 4821 West Street NW		<b>Transaction ID:</b> C73041	
City State Zip Code Washington DC 20007		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Richard Pierson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 1402 Locust Avenue		<b>Transaction ID:</b> C73853	
City State Zip Code Ruxton MD 21204		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer University of Maryland Occupation Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Ms. Emily Puhl

Mailing Address 117 Bosc Court

City State Zip Code  
Thurmont MD 21788

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 0 6

**Transaction ID: C74566**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Margaret Quinn

Mailing Address 26 Sparks Station Road

City State Zip Code  
Sparks MD 21152

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

Name of Employer Quinn Gordon & Wolf Occupation Paralegal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 0 6

**Transaction ID: C73787**

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
Virginia Ramsey

Mailing Address 201 Norwood Road

City State Zip Code  
Annapolis MD 21401

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 0 6

**Transaction ID: C73783**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>315.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Denise Reitan</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6
Mailing Address 3101 Schubert Drive		<b>Transaction ID: C73030</b>
City State Zip Code Silver Spring MD 20904	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer HTSI Occupation Programmer	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Robin S Rothrock</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 4801 Fairmont Avenue #613		<b>Transaction ID: C73023</b>
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Bio informatics Occupation Director	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Marvin Russell</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address 4208 Woodberry Street		<b>Transaction ID: C73892</b>
City State Zip Code University Park MD 20782	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer National Archives Occupation Archives	Aggregate Year-to-Date ▼ 337.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 205
	<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)  
Democratic State Central Committee of Maryland

A. Full Name (Last, First, Middle Initial) Ruth Saff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6	
Mailing Address PO Box 408		<b>Transaction ID: C72947</b>	
City Royal Oak	State MD	Amount of Each Receipt this Period 250.00	
Zip Code 21662			
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Barbara Santos		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 576 Laurel Road		<b>Transaction ID: C73828</b>	
City Riva	State MD	Amount of Each Receipt this Period 5000.00	
Zip Code 21140			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

C. Full Name (Last, First, Middle Initial) Barbara Santos		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 576 Laurel Road		<b>Transaction ID: C73827</b>	
City Riva	State MD	Amount of Each Receipt this Period 5000.00	
Zip Code 21140			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 205
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Deborah Grubin Sholtes

Mailing Address 14413 Autumn Crest Road

City State Zip Code  
Boys MD 20841

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

Name of Employer Occupation  
US FDA IT Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 0 / 2 0 0 6

**Transaction ID: C74063**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Langley Shook

Mailing Address PO Box 149

City State Zip Code  
Saint Michaels MD 21663

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

Name of Employer Occupation  
Sidley Austin Bronn Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 6

**Transaction ID: C72945**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Lani Sinclair

Mailing Address 105 Park Valley Road

City State Zip Code  
Silver Spring MD 20910

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

Name of Employer Occupation  
self free lance writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 6

**Transaction ID: C73849**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 205		
	<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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A.</b> Elizabeth Singer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 6180 Devon Drive		<b>Transaction ID:</b> C74324	
City State Zip Code Columbia MD 21044	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer NIH	Occupation Communications Dir		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.50		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Elizabeth A Skinner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 2417 Everton Road		<b>Transaction ID:</b> C74153	
City State Zip Code Baltimore MD 21209	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Johns Hopkins University	Occupation Senior Scientist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Susan B Stachelczyk		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 23238 Holly Hill Lane		<b>Transaction ID:</b> C74144	
City State Zip Code California MD 20619	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self O'Brien Realty	Occupation Realtor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 205
	<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)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Dan Stone

Mailing Address 8404 Aveley Manor Lane

City State Zip Code  
Easton MD 21601

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

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 6

**Transaction ID: C72942**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Carolyn Sturtevant

Mailing Address 58 Crescent Road # F

City State Zip Code  
Greenbelt MD 20770

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

Name of Employer Occupation  
LIBRARY OF CONGRESS LIBRARIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 0 / 2 0 0 6

**Transaction ID: C74300**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Vigdor Teplitz

Mailing Address 8615 Terrace Garden Way

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation  
NASA Goddard Physicist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 6

**Transaction ID: C73856**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. George Thoma</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 10624 Kenilworth Avenue # 103		<b>Transaction ID: C73844</b>	
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer NIH Occupation Scientist	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Richard J Turman</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 7415 Carroll Avenue		<b>Transaction ID: C74368</b>	
City State Zip Code Takoma Park MD 20912	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Association of American Universiti Occupation Director Federal Relations	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Ms. Susan W. Turnbull</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 16 Royal Dominion Court		<b>Transaction ID: C73818</b>	
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SWT Interiors Occupation Interior Designer	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 / 205
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Mr. James M. Voss

Mailing Address 25035 Pealiquour Road

City State Zip Code  
Denton MD 21629

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

Name of Employer Self / Retired Occupation  
Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 6

**Transaction ID: C73885**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Dorothy A Walsh

Mailing Address 6 East Lake Drive

City State Zip Code  
Annapolis MD 21403

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

Name of Employer U.S. Senator Bill Nelson Occupation  
Senior Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
240.92

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 6

**Transaction ID: C73043**

Amount of Each Receipt this Period  
85.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Virginia Woolridge

Mailing Address 207 Wardour Drive

City State Zip Code  
Annapolis MD 21401

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

Name of Employer self Occupation  
activist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 6

**Transaction ID: C73034**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>835.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 47 / 205  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Kathleen Wyatt

Mailing Address 7291 Bozman Neavitt Road PO Box 29

City State Zip Code  
Bozman MD 21612

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

Name of Employer Occupation  
retired retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 6

Transaction ID: C73765

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Harold Zirkin

Mailing Address 6419 Shadow Road

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
Zirkin-Cutler Investment Investment Banker

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 0 6

Transaction ID: C73914

Amount of Each Receipt this Period  
10000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10250.00

**TOTAL** This Period (last page this line number only) ..... ► 155160.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 205
	<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Citizens For Sarbanes</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address P.o. Box 26222		<b>Transaction ID: C73790</b>	
City State Zip Code Baltimore MD 21210	Amount of Each Receipt this Period 30000.00		
FEC ID number of contributing federal political committee. C	Transfer		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 30000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Laborers' Political League-laborers' International</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6	
Mailing Address 905 16th Street NW Second Floor		<b>Transaction ID: C72914</b>	
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	35000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	35000.00



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

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

FOR LINE NUMBER: PAGE 49 / 205  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street SE

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 424209.55

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: C73006

Amount of Each Receipt this Period  
20000.00

Transfer

**B.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street SE

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 424209.55

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: C73007

Amount of Each Receipt this Period  
20000.00

Transfer

**C.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street SE

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 424209.55

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 0 / 2 0 0 6

Transaction ID: C73791

Amount of Each Receipt this Period  
80000.00

Transfer

**SUBTOTAL** of Receipts This Page (optional) ..... ► 120000.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 205  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

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

Mailing Address 120 Maryland Avenue NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1869218.58

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

**Transaction ID: C73754**

Amount of Each Receipt this Period  
200000.00

Transfer

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

Mailing Address 120 Maryland Avenue NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1869218.58

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 6

**Transaction ID: C73942**

Amount of Each Receipt this Period  
637000.00

Transfer

**C.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Avenue NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1869218.58

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 6

**Transaction ID: C73941**

Amount of Each Receipt this Period  
160000.00

Transfer

**SUBTOTAL** of Receipts This Page (optional) ..... ► 997000.00

**TOTAL** This Period (last page this line number only) ..... ► 1117000.00

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

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

FOR LINE NUMBER: PAGE 51 / 205  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Friends of Christopher Robinson

Mailing Address PO Box 204

City State Zip Code  
Cambridge MD 21613

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 6

**Transaction ID: C73825**

Amount of Each Receipt this Period  
1500.00

purchased voterfile

**B.** Full Name (Last, First, Middle Initial)  
Nina Smith

Mailing Address 6911 Lyle Street

City State Zip Code  
Lanham MD 20706

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1725.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 6

**Transaction ID: C73766**

Amount of Each Receipt this Period  
153.00

**C.** Full Name (Last, First, Middle Initial)  
Nina Smith

Mailing Address 6911 Lyle Street

City State Zip Code  
Lanham MD 20706

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1725.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 6

**Transaction ID: C73799**

Amount of Each Receipt this Period  
96.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1749.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1749.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 205

<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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID: D11713</b> Date of Disbursement 10 / 16 / 2006
Mailing Address 200 Vesey Street		Amount of Each Disbursement this Period 209.30
City New York	State NY Zip Code 10285	
Purpose of Disbursement bank fees		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		<b>Transaction ID: D11597</b> Date of Disbursement 10 / 02 / 2006
Mailing Address PO Box 27025		Amount of Each Disbursement this Period 656.33
City Richmond	State VA Zip Code 23261	
Purpose of Disbursement bank charges		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		<b>Transaction ID: D11729</b> Date of Disbursement 10 / 02 / 2006
Mailing Address PO Box 27025		Amount of Each Disbursement this Period 35.00
City Richmond	State VA Zip Code 23261	
Purpose of Disbursement bank fees		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	900.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		<b>Transaction ID: D11881</b> Date of Disbursement 10 / 12 / 2006
Mailing Address PO Box 27025		Amount of Each Disbursement this Period 30.00
City Richmond	State VA Zip Code 23261	
Purpose of Disbursement bank fees		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		<b>Transaction ID: D11712</b> Date of Disbursement 10 / 16 / 2006
Mailing Address PO Box 27025		Amount of Each Disbursement this Period 30.00
City Richmond	State VA Zip Code 23261	
Purpose of Disbursement bank fees		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		<b>Transaction ID: D11967</b> Date of Disbursement 10 / 16 / 2006
Mailing Address PO Box 27025		Amount of Each Disbursement this Period 25.00
City Richmond	State VA Zip Code 23261	
Purpose of Disbursement bank fees		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	85.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 205

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

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

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		<b>Transaction ID: D11964</b>	
Mailing Address PO Box 27025		Date of Disbursement 10 / 16 / 2006	
City Richmond	State VA	Zip Code 23261	Amount of Each Disbursement this Period 55.00
Purpose of Disbursement bank fees		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		<b>Transaction ID: D11970</b>	
Mailing Address PO Box 27025		Date of Disbursement 10 / 18 / 2006	
City Richmond	State VA	Zip Code 23261	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement bank fees		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. BC's Unlimited Promotions</b>		<b>Transaction ID: D11621</b>	
Mailing Address 2002 Whitter Ave		Date of Disbursement 10 / 09 / 2006	
City Baltimore	State MD	Zip Code 21217	Amount of Each Disbursement this Period 1198.00
Purpose of Disbursement volunteer exempt shirts		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1303.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. CMC - Pearl LC</b>		<b>Transaction ID: D11610</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 7300 Pearl Street		Amount of Each Disbursement this Period 1000.00
City Bethesda	State MD Zip Code 20814	
Purpose of Disbursement rent deposit		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kelly Press</b>		<b>Transaction ID: D11604</b> Date of Disbursement 10 / 03 / 2006
Mailing Address 1701 Cabin Branch Road		Amount of Each Disbursement this Period 15554.00
City Landover	State MD Zip Code 20785	
Purpose of Disbursement volunteer exempt yard signs		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ralco Products</b>		<b>Transaction ID: D11605</b> Date of Disbursement 10 / 03 / 2006
Mailing Address 627 Reisterstown Road		Amount of Each Disbursement this Period 29945.62
City Baltimore	State MD Zip Code 21208	
Purpose of Disbursement volunteer exempt signs		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	46499.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Red Maple Properties</b>		<b>Transaction ID: D11602</b> Date of Disbursement 10 / 03 / 2006
Mailing Address PO Box 1192		Amount of Each Disbursement this Period 700.00
City Eldersburg	State MD Zip Code 21784	
Purpose of Disbursement rent deposit		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID: D11751</b> Date of Disbursement 10 / 05 / 2006
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 1200.00
City Baltimore	State MD Zip Code 21297	
Purpose of Disbursement deposit phones		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		<b>Transaction ID: D11870</b> Date of Disbursement 10 / 11 / 2006
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 400.00
City Baltimore	State MD Zip Code 21297	
Purpose of Disbursement phone Deposit		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		<b>Transaction ID: D11871</b> Date of Disbursement 10 / 12 / 2006
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 200.00
City Baltimore	State MD Zip Code 21297	
Purpose of Disbursement phone Deposit		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID: D11969</b> Date of Disbursement 10 / 16 / 2006
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 800.00
City Baltimore	State MD Zip Code 21297	
Purpose of Disbursement deposit phones		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		<b>Transaction ID: D11966</b> Date of Disbursement 10 / 16 / 2006
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 1200.00
City Baltimore	State MD Zip Code 21297	
Purpose of Disbursement deposit phones		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		<b>Transaction ID: D11973</b> Date of Disbursement 10 / 18 / 2006	
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 600.00	
City Baltimore State MD Zip Code 21297	Purpose of Disbursement deposit phones Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Voter Activation Network</b>		<b>Transaction ID: D11882</b> Date of Disbursement 10 / 12 / 2006	
Mailing Address 48 Grove Street #202		Amount of Each Disbursement this Period 3850.00	
City Somerville State MA Zip Code 02144	Purpose of Disbursement webase voterfile Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

4450.00

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

57738.25

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input checked="" 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)

Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial)

**A.** Howard County Community College

Mailing Address 10901 Little Patuxent Parkway

City Columbia State MD Zip Code 21044

Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D11606

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

2000.00

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

2000.00

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

2000.00

**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)

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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)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Nina R. Houghton</b>		<b>Transaction ID: D11599</b> Date of Disbursement 10 / 02 / 2006	
Mailing Address PO Box 6		Amount of Each Disbursement this Period 1000.00	
City Queenstown State MD Zip Code 21658	Purpose of Disbursement refund excess contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. James Muldoon</b>		<b>Transaction ID: D11625</b> Date of Disbursement 10 / 12 / 2006	
Mailing Address 1500 K Street NW, Suite 350		Amount of Each Disbursement this Period 5000.00	
City Washington State DC Zip Code 20005	Purpose of Disbursement refund contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>6000.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Afro-American Newspaper</b>		<b>Transaction ID: D11711</b>	
Mailing Address 2519 North Charles Street		Date of Disbursement 10 / 13 / 2006	
City Baltimore	State MD	Zip Code 21218	Amount of Each Disbursement this Period 900.00
Purpose of Disbursement advertising no fed candidate		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Albert Alaofin</b>		<b>Transaction ID: D11731</b>	
Mailing Address 10005 Nicol Court E		Date of Disbursement 10 / 02 / 2006	
City Mitchellville	State MD	Zip Code 20721	Amount of Each Disbursement this Period 330.00
Purpose of Disbursement canvasser		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Albert Alaofin</b>		<b>Transaction ID: D11819</b>	
Mailing Address 10005 Nicol Court E		Date of Disbursement 10 / 06 / 2006	
City Mitchellville	State MD	Zip Code 20721	Amount of Each Disbursement this Period 230.00
Purpose of Disbursement canvasser		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1460.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Aloï</b>		<b>Transaction ID: D11981</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 2611 Admans Mill Road NW #208		Amount of Each Disbursement this Period 1616.33
City Washington State DC Zip Code 20009	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Lynette Anderson</b>		<b>Transaction ID: D11820</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 3211 22nd Street NE		Amount of Each Disbursement this Period 150.00
City Washington State DC Zip Code 20018	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Trevor Anderson</b>		<b>Transaction ID: D11752</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address Morgan State Univ O'Connell Hall R		Amount of Each Disbursement this Period 100.00
City Baltimore State MD Zip Code 21251	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1866.33
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Dominique Andrews</b>		<b>Transaction ID: D11753</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 3811 Glenarm Avenue		Amount of Each Disbursement this Period 100.00
City Baltimore State MD Zip Code 21206	Category/ Type	
Purpose of Disbursement canvasser		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Neville Angus</b>		<b>Transaction ID: D11732</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 5318 Taylor Street		Amount of Each Disbursement this Period 190.00
City Bladensburg State MD Zip Code 20710	Category/ Type	
Purpose of Disbursement canvasser		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Neville Angus</b>		<b>Transaction ID: D11821</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 5318 Taylor Street		Amount of Each Disbursement this Period 100.00
City Bladensburg State MD Zip Code 20710	Category/ Type	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	390.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Carrington Archibong</b>		<b>Transaction ID: D11880</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1168 Southern Night Lane		Amount of Each Disbursement this Period 50.00
City Gaithersburg State MD Zip Code 20879	Purpose of Disbursement canvasser Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Conell Artis</b>		<b>Transaction ID: D11754</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 2243 W Fayette Street		Amount of Each Disbursement this Period 150.00
City Baltimore State MD Zip Code 21216	Purpose of Disbursement canvasser Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Carleton Atkinson</b>		<b>Transaction ID: D11982</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 258 Gretna Green Court		Amount of Each Disbursement this Period 2325.78
City Alexandria State VA Zip Code 22304	Purpose of Disbursement payroll Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2525.78</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Amzat Ayodeji</b>		<b>Transaction ID: D11733</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 10905 Fruitwood Drive		Amount of Each Disbursement this Period 220.00
City Bowie	State MD Zip Code 20720	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amzat Ayodeji</b>		<b>Transaction ID: D11822</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 10905 Fruitwood Drive		Amount of Each Disbursement this Period 170.00
City Bowie	State MD Zip Code 20720	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Samuel Ayorinde</b>		<b>Transaction ID: D11913</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 3308 Heidi Lane		Amount of Each Disbursement this Period 160.00
City Springdale	State MD Zip Code 20774	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Yusif Bangura</b>		<b>Transaction ID: D11734</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 4318 Saratoga Avenue NE		Amount of Each Disbursement this Period 50.00
City Washington	State DC	
Zip Code 20018		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		<b>Transaction ID: D12062</b> Date of Disbursement 10 / 13 / 2006
Mailing Address PO Box 27025		Amount of Each Disbursement this Period 26401.80
City Richmond	State VA	
Zip Code 23261		
Purpose of Disbursement payroll taxes		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Brian Beauchamp</b>		<b>Transaction ID: D11807</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 1137 Pipestem Place		Amount of Each Disbursement this Period 100.00
City Potomac	State MD	
Zip Code 20854		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>26551.80</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mary M Belin</b>		<b>Transaction ID: D11735</b> Date of Disbursement 10 / 05 / 2006	
Mailing Address 902 60th Avenue		Amount of Each Disbursement this Period 160.00	
City Fairmont Heights State MD Zip Code 20743	Purpose of Disbursement canvasser Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mary M Belin</b>		<b>Transaction ID: D11823</b> Date of Disbursement 10 / 06 / 2006	
Mailing Address 902 60th Avenue		Amount of Each Disbursement this Period 100.00	
City Fairmont Heights State MD Zip Code 20743	Purpose of Disbursement canvasser Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. John Bell</b>		<b>Transaction ID: D11859</b> Date of Disbursement 10 / 06 / 2006	
Mailing Address 422 East Biddle Street		Amount of Each Disbursement this Period 400.00	
City Baltimore State MD Zip Code 21202	Purpose of Disbursement canvasser Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	660.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Sandra Benson Brantley</b>		<b>Transaction ID: D11984</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 9314 Weaver Street		Amount of Each Disbursement this Period 3117.13
City Silver Spring State MD Zip Code 20901	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sandra Benson Brantley</b>		<b>Transaction ID: D11975</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 9314 Weaver Street		Amount of Each Disbursement this Period 3346.08
City Silver Spring State MD Zip Code 20901	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Aaron Bernard-Luce</b>		<b>Transaction ID: D11808</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 706 Leonard Hall Amer Univ 4400 Ma		Amount of Each Disbursement this Period 150.00
City Washington State DC Zip Code 20016	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6613.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Anthony Blake</b>		<b>Transaction ID: D11872</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 3614 E Northern Pkwy		Amount of Each Disbursement this Period 100.00
City Baltimore	State MD	
Zip Code 21206	Purpose of Disbursement canvasser	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mark Bochkis</b>		<b>Transaction ID: D11983</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 2445 Lyttonsville Road # 606		Amount of Each Disbursement this Period 587.57
City Silver Spring	State MD	
Zip Code 20910	Purpose of Disbursement paryoll	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Peter Boyd</b>		<b>Transaction ID: D11755</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 3723 Yolando Rd		Amount of Each Disbursement this Period 240.00
City Baltimore	State MD	
Zip Code 21218	Purpose of Disbursement canvasser	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	927.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Marsha Branch</b>		<b>Transaction ID: D11861</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 529 N Robinson Street		Amount of Each Disbursement this Period 338.00
City Baltimore State MD Zip Code 21205		
Purpose of Disbursement canvasser	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Amber Brown</b>		<b>Transaction ID: D11873</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 4505 Sipple Avenue		Amount of Each Disbursement this Period 140.00
City Baltimore State MD Zip Code 21206		
Purpose of Disbursement canvasser	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Michael A Brown</b>		<b>Transaction ID: D11756</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 5364 Mad River Lane		Amount of Each Disbursement this Period 350.00
City Columbia State MD Zip Code 21044		
Purpose of Disbursement canvasser	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	828.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Karen Brown-Connelly</b>		<b>Transaction ID: D11757</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 1801 Sherwood Avenue		Amount of Each Disbursement this Period 288.00
City Baltimore	State MD	
Zip Code 21239		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Melissa Campbell</b>		<b>Transaction ID: D11977</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 663 Portland Street		Amount of Each Disbursement this Period 1409.51
City Baltimore	State MD	
Zip Code 21230		
Purpose of Disbursement payroll		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sean Canavan</b>		<b>Transaction ID: D11875</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 2939 Van Ness Street NW		Amount of Each Disbursement this Period 60.00
City Washington	State DC	
Zip Code 20008		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1757.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Darrick Chambers</b>		<b>Transaction ID: D11758</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 2507 McHenry Street		Amount of Each Disbursement this Period 180.00
City Baltimore State MD Zip Code 21223	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Caitlin Chappelle</b>		<b>Transaction ID: D11809</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 4411 Hallet Street		Amount of Each Disbursement this Period 100.00
City Rockville State MD Zip Code 20853	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Arthur Chase</b>		<b>Transaction ID: D11759</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 2243 E PreStreeton Street		Amount of Each Disbursement this Period 230.00
City Baltimore State MD Zip Code 21213	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	510.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. James Chestnut</b>		<b>Transaction ID: D11760</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 1607 Laurens Street		Amount of Each Disbursement this Period 300.00
City Baltimore State MD Zip Code 21217	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jasmine Coleman</b>		<b>Transaction ID: D11862</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 2500 W Roger Avenue		Amount of Each Disbursement this Period 290.00
City Baltimore State MD Zip Code 21215	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Larry Coleman</b>		<b>Transaction ID: D11863</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 2500 W Roger Avenue		Amount of Each Disbursement this Period 100.00
City Baltimore State MD Zip Code 21215	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	690.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Sarah Coles</b>		<b>Transaction ID: D11924</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 13721 Town Line Rd		Amount of Each Disbursement this Period 50.00
City Silver Spring State MD Zip Code 20906	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Horace Corbin</b>		<b>Transaction ID: D11761</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 529 N Robinson Street		Amount of Each Disbursement this Period 190.00
City Baltimore State MD Zip Code 21205	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Joseph Corradino</b>		<b>Transaction ID: D11923</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 4201 Willard Avenue		Amount of Each Disbursement this Period 180.00
City Bethesda State MD Zip Code 20815	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	420.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Tameeka Crips</b>		<b>Transaction ID: D11925</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1540 Pentridge Rd # 304 C		Amount of Each Disbursement this Period 60.00
City Baltimore State MD Zip Code 21239	Purpose of Disbursement canvasser 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael Davis</b>		<b>Transaction ID: D11736</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 960 Placid Court		Amount of Each Disbursement this Period 102.00
City Arnold State MD Zip Code 21012	Purpose of Disbursement canvasser 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael Davis</b>		<b>Transaction ID: D11824</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 960 Placid Court		Amount of Each Disbursement this Period 240.00
City Arnold State MD Zip Code 21012	Purpose of Disbursement canvasser 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) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	402.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Robert Davis</b>		<b>Transaction ID: D11762</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 411 N Chester Street		Amount of Each Disbursement this Period 120.00
City Baltimore	State MD	
Zip Code 21231	Category/Type	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daria Dawson</b>		<b>Transaction ID: D11985</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 13448 N Meridian Road		Amount of Each Disbursement this Period 1116.06
City Tallahassee	State FL	
Zip Code 32312	Category/Type	
Purpose of Disbursement payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. John Dixon</b>		<b>Transaction ID: D11763</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 21328 Williams Drive		Amount of Each Disbursement this Period 340.00
City Lexington Park	State MD	
Zip Code 20653	Category/Type	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1576.06
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Ronnie Djoukeng</b>		<b>Transaction ID: D11825</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 1207 Forest Glen Road		Amount of Each Disbursement this Period 144.00
City Silver Spring State MD Zip Code 20901	Purpose of Disbursement canvasser	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Delvan Dorsey</b>		<b>Transaction ID: D11802</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 3907 Windbrook Court		Amount of Each Disbursement this Period 54.00
City Clinton State MD Zip Code 20735	Purpose of Disbursement canvasser	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Marc Edwards</b>		<b>Transaction ID: D11986</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 9885 Edisto Way		Amount of Each Disbursement this Period 803.14
City Baltimore State MD Zip Code 21220	Purpose of Disbursement payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1001.14
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Benson Erwin</b>		<b>Transaction ID: D11987</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 6 West 39th Street		Amount of Each Disbursement this Period 790.36
City Baltimore State MD Zip Code 21218	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Arthur Fabel</b>		<b>Transaction ID: D11737</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 14120 Flint Rock Road		Amount of Each Disbursement this Period 290.00
City Rockville State MD Zip Code 20853	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Sarah Fahmy</b>		<b>Transaction ID: D11764</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 12300 Charles Rd		Amount of Each Disbursement this Period 50.00
City Silver Spring State MD Zip Code 20906	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1130.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Alan Forbes</b>		<b>Transaction ID: D12036</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 7902 Tiffany Lane		Amount of Each Disbursement this Period 738.00
City Lanham State MD Zip Code 20706	Category/ Type	
Purpose of Disbursement payroll		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Britt Foxworth</b>		<b>Transaction ID: D12037</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1601 Argonne Place NW #509		Amount of Each Disbursement this Period 1019.37
City Washington State DC Zip Code 20009	Category/ Type	
Purpose of Disbursement payroll		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Keisha Frederick</b>		<b>Transaction ID: D11765</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 7585 Ives Ln		Amount of Each Disbursement this Period 140.00
City Dundalk State MD Zip Code 21222	Category/ Type	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1897.37
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Philip Freedman</b>		<b>Transaction ID: D12038</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 905 Ann More Drive		Amount of Each Disbursement this Period 802.33
City Wheaton State MD Zip Code 20902	Category/ Type	
Purpose of Disbursement payroll		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Terryus Freeman</b>		<b>Transaction ID: D11738</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 2906 Erie Street SE		Amount of Each Disbursement this Period 50.00
City Washington State DC Zip Code 20020	Category/ Type	
Purpose of Disbursement canvasser		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Terryus Freeman</b>		<b>Transaction ID: D11826</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 2906 Erie Street SE		Amount of Each Disbursement this Period 60.00
City Washington State DC Zip Code 20020	Category/ Type	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	912.33
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Malcolm Gaddy</b>		<b>Transaction ID: D11766</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 7585 Ives Ln # B		Amount of Each Disbursement this Period 140.00
City Baltimore State MD Zip Code 21222	Category/ Type	
Purpose of Disbursement canvasser		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Rachel Gaddy</b>		<b>Transaction ID: D11864</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 7585 Ives Lane #B		Amount of Each Disbursement this Period 408.00
City Baltimore State MD Zip Code 21222	Category/ Type	
Purpose of Disbursement canvasser		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Zachary Gallant</b>		<b>Transaction ID: D12039</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 3201 St Florence Terrace		Amount of Each Disbursement this Period 826.00
City Olney State MD Zip Code 20832	Category/ Type	
Purpose of Disbursement payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1374.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Malini Ganvir</b> Full Name (Last, First, Middle Initial) Mailing Address 5435 East Nithsdale Drive City Salisbury State MD Zip Code 21801 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11803</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 36.00 Category/Type
--	--	--

<b>B. Jason Garner</b> Full Name (Last, First, Middle Initial) Mailing Address 2403 Foster Place City Temple Hills State MD Zip Code 20748 Purpose of Disbursement Canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11827</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 220.00 Category/Type
--	--	---

<b>C. Urcille Goddard</b> Full Name (Last, First, Middle Initial) Mailing Address 1067 Upnor Road City Baltimore State MD Zip Code 21212 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11767</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
--	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	306.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Marck Goldstein</b>		<b>Transaction ID: D11810</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address    Betts 421 4400 Mass Avenue NW		Amount of Each Disbursement this Period 50.00	
City Washington	State DC	Zip Code 20016	Category/ Type
Purpose of Disbursement canvasser		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:                  District:			

Full Name (Last, First, Middle Initial) <b>B. Lauren Goss</b>		<b>Transaction ID: D11876</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address    429 Kenyon Street NW Unit 103		Amount of Each Disbursement this Period 110.00	
City Washington	State DC	Zip Code 20010	Category/ Type
Purpose of Disbursement canvasser		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:                  District:			

Full Name (Last, First, Middle Initial) <b>C. Chenelle Gould</b>		<b>Transaction ID: D11768</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address    106 Edgewood Street		Amount of Each Disbursement this Period 50.00	
City Baltimore	State MD	Zip Code 21229	Category/ Type
Purpose of Disbursement canvasser		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:                  District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	210.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Sarah Greenberger</b>		<b>Transaction ID:</b> D12040 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1615 Q Street NW		Amount of Each Disbursement this Period 846.62
City Washington State DC Zip Code 20009	Category/ Type	
Purpose of Disbursement payroll		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Marc Guido</b>		<b>Transaction ID:</b> D11988 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 611 West 33rd		Amount of Each Disbursement this Period 1779.04
City Baltimore State MD Zip Code 21211	Category/ Type	
Purpose of Disbursement payroll		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Phillip Gustave</b>		<b>Transaction ID:</b> D11769 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 91-60 193rd Street #3F		Amount of Each Disbursement this Period 50.00
City Hollis State NY Zip Code 11423	Category/ Type	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2675.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Jesse Haladay</b>		<b>Transaction ID: D11989</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1810 Kenway Road		Amount of Each Disbursement this Period 818.84
City Baltimore State MD Zip Code 21204	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Barry Hale</b>		<b>Transaction ID: D11828</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 3572 Dean Drive #02		Amount of Each Disbursement this Period 200.00
City Hyattsville State MD Zip Code 20782	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Abraham Hall</b>		<b>Transaction ID: D11829</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 7602 Fountainbleu Drive #265		Amount of Each Disbursement this Period 50.00
City New Carrollton State MD Zip Code 20784	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1068.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mr. Keith Hall, Jr</b>		<b>Transaction ID: D11739</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 10115 Autumn Ridge Court		Amount of Each Disbursement this Period 100.00
City Mitchellville State MD Zip Code 20721	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Keith Hall, Jr</b>		<b>Transaction ID: D11830</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 10115 Autumn Ridge Court		Amount of Each Disbursement this Period 100.00
City Mitchellville State MD Zip Code 20721	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Tremayne Hall</b>		<b>Transaction ID: D11831</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 10115 Autumn Ridge Ct		Amount of Each Disbursement this Period 150.00
City Mitchellville State MD Zip Code 20721	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Nicole Hanson</b>		Transaction ID: D11770 Date of Disbursement 10 / 06 / 2006	
Mailing Address 35 Dowling Circle B2		Amount of Each Disbursement this Period 50.00	
City Baltimore State MD Zip Code 21234	Purpose of Disbursement canvasser	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Arthur Harris</b>		Transaction ID: D11990 Date of Disbursement 10 / 13 / 2006	
Mailing Address 714 A Street NE #3		Amount of Each Disbursement this Period 1849.96	
City Washington State DC Zip Code 20002	Purpose of Disbursement payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Josh Hastings</b>		Transaction ID: D12048 Date of Disbursement 10 / 13 / 2006	
Mailing Address 11648 Norris twilley Road		Amount of Each Disbursement this Period 774.66	
City Mardela Springs State MD Zip Code 21837	Purpose of Disbursement payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2674.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Daniel Hellweg</b>		<b>Transaction ID: D11991</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 10 N Oak Avenue		Amount of Each Disbursement this Period 738.00
City Leominster	State MA Zip Code 01453	
Purpose of Disbursement payroll	<input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dian Herrman</b>		<b>Transaction ID: D11992</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 6702 Westmoreland Avenue		Amount of Each Disbursement this Period 1504.25
City Takoma Park	State MD Zip Code 20912	
Purpose of Disbursement payroll	<input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) <b>C. Audrianna Hill</b>		<b>Transaction ID: D11772</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 107 S Augusta Avenue		Amount of Each Disbursement this Period 100.00
City Baltimore	State MD Zip Code 21229	
Purpose of Disbursement canvasser	<input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2342.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Rory Holloway</b>		<b>Transaction ID: D11832</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 13009 Scaleduck Court		Amount of Each Disbursement this Period 170.00
City Upper Marlboro	State MD	
Zip Code 20774	Purpose of Disbursement canvasser	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kennedy Huddleston</b>		<b>Transaction ID: D11773</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 3801 Wabash # 2B		Amount of Each Disbursement this Period 90.00
City Baltimore	State MD	
Zip Code 21215	Purpose of Disbursement canvasser	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Justin Isbell</b>		<b>Transaction ID: D11774</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 3030 Great Oak Drive		Amount of Each Disbursement this Period 48.00
City Forestville	State MD	
Zip Code 20747	Purpose of Disbursement canvasser	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	308.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Seth Jacobson</b>		<b>Transaction ID: D11922</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1131 University Blvd W # 1018		Amount of Each Disbursement this Period 110.00
City Silver Spring State MD Zip Code 20902	Purpose of Disbursement canvasser Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Ibrahim Jah</b>		<b>Transaction ID: D11741</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 7850 Somerset Court		Amount of Each Disbursement this Period 120.00
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement canvasser Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ibrahim Jah</b>		<b>Transaction ID: D11740</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 7850 Somerset Court		Amount of Each Disbursement this Period 235.00
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement canvasser Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	465.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Ibrahim Jah</b>		<b>Transaction ID: D11833</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 7850 Somerset Court		Amount of Each Disbursement this Period 300.00
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement canvasser 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Shakea Jett</b>		<b>Transaction ID: D11775</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 7585 Ives Ln		Amount of Each Disbursement this Period 290.00
City Dundalk State MD Zip Code 21222	Purpose of Disbursement canvasser 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Edward Jewell</b>		<b>Transaction ID: D11921</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 8504 Greenwood Avenue #6		Amount of Each Disbursement this Period 250.00
City Takoma Park State MD Zip Code 20912	Purpose of Disbursement canvasser 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) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	840.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mr. William C Johnson, Jr.</b>		<b>Transaction ID: D11993</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 5805 Broad Branch Way		Amount of Each Disbursement this Period 867.25	
City Frederick State MD Zip Code 21704	Purpose of Disbursement payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Michael Jones</b>		<b>Transaction ID: D11920</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 14013 Woodwell Terrace		Amount of Each Disbursement this Period 120.00	
City Silver Spring State MD Zip Code 20906	Purpose of Disbursement canvasser Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Paul Matthew Kahn</b>		<b>Transaction ID: D11994</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 136 Newport Bay Drive		Amount of Each Disbursement this Period 1862.66	
City Ocean City State MD Zip Code 21842	Purpose of Disbursement payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2849.91
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Matthew Kasdan</b>		<b>Transaction ID: D11995</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 31932 Violete Lane		Amount of Each Disbursement this Period 1656.91
City Coto De Caza State CA Zip Code 92679	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Nakisa Kashanian</b>		<b>Transaction ID: D11811</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 9926 Shellburn Terrace #207		Amount of Each Disbursement this Period 100.00
City Gaithersburg State MD Zip Code 20878	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jamie M. Kendrick</b>		<b>Transaction ID: D12049</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 4518 Arabia Avenue		Amount of Each Disbursement this Period 1175.43
City Baltimore State MD Zip Code 21214	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2932.34
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Bakari Khalid</b>		<b>Transaction ID: D11776</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 2319-F Salem Village Road		Amount of Each Disbursement this Period 128.00
City Parkville State MD Zip Code 21234	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Aaron Kushner</b>		<b>Transaction ID: D11919</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 10701 Boswell Lane		Amount of Each Disbursement this Period 180.00
City Potomac State MD Zip Code 20854	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Matt Larson</b>		<b>Transaction ID: D12042</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 3003 Van Ness Street NW #W1010		Amount of Each Disbursement this Period 826.00
City Washington State DC Zip Code 20008	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1134.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A. Rogers Lawrence</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1727 Albert Drive</p> <p>City Mitchellville State MD Zip Code 20721</p> <p>Purpose of Disbursement canvasser</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><b>Transaction ID: D11742</b></p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="40.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p><b>B. Rogers Lawrence</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1727 Albert Drive</p> <p>City Mitchellville State MD Zip Code 20721</p> <p>Purpose of Disbursement canvasser</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><b>Transaction ID: D11834</b></p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="170.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p><b>C. Benjamin Lawson</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1499 Massachusetts Avenue #301</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement canvasser</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><b>Transaction ID: D11877</b></p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="260.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Desmond Lawson</b>		<b>Transaction ID: D11777</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 1 Polaris Court # L		Amount of Each Disbursement this Period 96.00
City Parkville State MD Zip Code 21234		
Purpose of Disbursement canvasser Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Desmond Lawson</b>		<b>Transaction ID: D11912</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1 Polaris Court # L		Amount of Each Disbursement this Period 170.00
City Parkville State MD Zip Code 21234		
Purpose of Disbursement canvasser Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mara Lee</b>		<b>Transaction ID: D11997</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 12061 Westwood Drive		Amount of Each Disbursement this Period 1039.99
City Auburn State CA Zip Code 95603		
Purpose of Disbursement payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1305.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Sean Lee</b>		<b>Transaction ID: D11835</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 5440 Taylor Street		Amount of Each Disbursement this Period 200.00
City Bladensburg State MD Zip Code 20710	Category/ Type	
Purpose of Disbursement canvasser		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Susan T Levitan</b>		<b>Transaction ID: D11998</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 2650 Worrell Court		Amount of Each Disbursement this Period 1539.54
City Crofton State MD Zip Code 21114	Category/ Type	
Purpose of Disbursement payroll		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Thomas Little</b>		<b>Transaction ID: D11911</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 2221 W Fayette		Amount of Each Disbursement this Period 100.00
City Baltimore State MD Zip Code 21223	Category/ Type	
Purpose of Disbursement Canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1839.54
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. James Lucas</b> Full Name (Last, First, Middle Initial) Mailing Address 1632 N Bentalou Street City Baltimore State MD Zip Code 21216 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11910</b> Date of Disbursement 10 / 12 / 2006 Amount of Each Disbursement this Period 310.00 Category/Type
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<b>B. Vincent Lucas</b> Full Name (Last, First, Middle Initial) Mailing Address 1632 N Bentalou Street City Baltimore State MD Zip Code 21216 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11778</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 140.00 Category/Type
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<b>C. Vincent Lucas</b> Full Name (Last, First, Middle Initial) Mailing Address 1632 N Bentalou Street City Baltimore State MD Zip Code 21216 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11909</b> Date of Disbursement 10 / 12 / 2006 Amount of Each Disbursement this Period 420.00 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	870.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b> Full Name (Last, First, Middle Initial) Honson Luma</p> <p>Mailing Address 3117 75th Avenue #302</p> <p>City Landover State MD Zip Code 20785</p> <p>Purpose of Disbursement canvasser</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><b>Transaction ID:</b> D11743</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.00"/></p>
<p>Purpose of Disbursement canvasser</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>B.</b> Full Name (Last, First, Middle Initial) Honson Luma</p> <p>Mailing Address 3117 75th Avenue #302</p> <p>City Landover State MD Zip Code 20785</p> <p>Purpose of Disbursement canvasser</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><b>Transaction ID:</b> D11836</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>Purpose of Disbursement canvasser</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>C.</b> Full Name (Last, First, Middle Initial) Ebony Lyons</p> <p>Mailing Address 1530 Pentridge Rd # 409C</p> <p>City Baltimore State MD Zip Code 21239</p> <p>Purpose of Disbursement canvasser</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><b>Transaction ID:</b> D11804</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p>
<p>Purpose of Disbursement canvasser</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="190.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Keith Maness</b>		<b>Transaction ID: D11837</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 9907 Tulip Trail Drive		Amount of Each Disbursement this Period 100.00	
City Mitchellville State MD Zip Code 20721	Purpose of Disbursement canvasser	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Felicia Marshall</b>		<b>Transaction ID: D11838</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 9205 Pine View Lane		Amount of Each Disbursement this Period 150.00	
City Clinton State MD Zip Code 20735	Purpose of Disbursement canvasser	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Sarah Martin</b>		<b>Transaction ID: D11999</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 1101 Club Village Drive # 210		Amount of Each Disbursement this Period 846.62	
City Columbia State MO Zip Code 65203	Purpose of Disbursement paryoll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1096.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Justin Maturo</b> Full Name (Last, First, Middle Initial) Mailing Address 50 Mary Street City Tappan State NY Zip Code 10983 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11918</b> Date of Disbursement 10 / 12 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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<b>B. Tydesha Mayo</b> Full Name (Last, First, Middle Initial) Mailing Address 3922 Fairview Avenue City Baltimore State MD Zip Code 21216 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11779</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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<b>C. Tydesha Mayo</b> Full Name (Last, First, Middle Initial) Mailing Address 3922 Fairview Avenue City Baltimore State MD Zip Code 21216 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11908</b> Date of Disbursement 10 / 12 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 102 / 205

<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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. John McCoy IV</b>		<b>Transaction ID: D11907</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 3930 Kimble Road		Amount of Each Disbursement this Period 50.00
City Baltimore State MD Zip Code 21218	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mollie Meikle</b>		<b>Transaction ID: D12050</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 77 Hancock Street #1		Amount of Each Disbursement this Period 588.01
City Cambridge State MA Zip Code 02139	Purpose of Disbursement payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jeremy Melloul</b>		<b>Transaction ID: D11917</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 10409 Stable Lane		Amount of Each Disbursement this Period 50.00
City Potomac State MD Zip Code 20854	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	688.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Robert Metz</b>		<b>Transaction ID: D12043</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 4827 Alton Place NW		Amount of Each Disbursement this Period 1039.99
City Washington State DC Zip Code 20016	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Towanna Miller</b>		<b>Transaction ID: D11780</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 439 Hopkins Landing Drive		Amount of Each Disbursement this Period 440.00
City Essex State MD Zip Code 21221	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Towanna Miller</b>		<b>Transaction ID: D11906</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 439 Hopkins Landing Drive		Amount of Each Disbursement this Period 250.00
City Essex State MD Zip Code 21221	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1729.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mockingbird Inc.</b>		<b>Transaction ID:</b> D12001 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 5115 Wetheredsville Road		Amount of Each Disbursement this Period 1952.84
City Baltimore State MD Zip Code 21229	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Robert Mook</b>		<b>Transaction ID:</b> D12000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 610 Americana Drive # 102		Amount of Each Disbursement this Period 2205.78
City Annapolis State MD Zip Code 21403	Purpose of Disbursement paryoll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Takia Moore</b>		<b>Transaction ID:</b> D11905 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 32 Harwood Street		Amount of Each Disbursement this Period 100.00
City Dorchester State MA Zip Code 02124	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4258.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 205

<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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. MSHC Partners</b>		<b>Transaction ID:</b> D11730 Date of Disbursement
Mailing Address 1155 15th Street NW #300		<input type="text" value="10"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Washington	State DC	Zip Code 20005
Purpose of Disbursement exempt mail piece	<input type="text" value="16350.00"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MSHC Partners</b>		<b>Transaction ID:</b> D11971 Date of Disbursement
Mailing Address 1155 15th Street NW #300		<input type="text" value="10"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Washington	State DC	Zip Code 20005
Purpose of Disbursement exempt mail	<input type="text" value="202810.00"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MSHC Partners</b>		<b>Transaction ID:</b> D11972 Date of Disbursement
Mailing Address 1155 15th Street NW #300		<input type="text" value="10"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Washington	State DC	Zip Code 20005
Purpose of Disbursement exempt mail	<input type="text" value="24800.00"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="243960.00"/>
<b>TOTAL</b> 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)

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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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Lucinia Mundy</b>		<b>Transaction ID: D11744</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 16059 Woodville Road		Amount of Each Disbursement this Period 10.00
City Brandywine State MD Zip Code 20613	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lucinia Mundy</b>		<b>Transaction ID: D11839</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 16059 Woodville Road		Amount of Each Disbursement this Period 170.00
City Brandywine State MD Zip Code 20613	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Roy Murray</b>		<b>Transaction ID: D11781</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 4520 Pimlico Road		Amount of Each Disbursement this Period 100.00
City Baltimore State MD Zip Code 21215	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	280.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Roy Murray</b>		<b>Transaction ID: D11904</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 4520 Pimlico Road		Amount of Each Disbursement this Period 290.00
City Baltimore State MD Zip Code 21215	Purpose of Disbursement canvasser 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) ▼		
Category/Type		

Full Name (Last, First, Middle Initial) <b>B. Brianne Nadeau</b>		<b>Transaction ID: D12051</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 2112 New Hampshire Avenue NW # 404		Amount of Each Disbursement this Period 1447.37
City Washington State DC Zip Code 20009	Purpose of Disbursement payroll 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) ▼		
Category/Type		

Full Name (Last, First, Middle Initial) <b>C. Amanda Naeemi</b>		<b>Transaction ID: D11916</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 13400 Moran Drive		Amount of Each Disbursement this Period 60.00
City N Potomac State MD Zip Code 20878	Purpose of Disbursement canvasser 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) ▼		
Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1797.37
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. William Neil</b>		<b>Transaction ID: D11812</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 2008 Gainsboro Road		Amount of Each Disbursement this Period 200.00
City Rockville	State MD Zip Code 20851	
Purpose of Disbursement canvasser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Harold Nesmith</b>		<b>Transaction ID: D11915</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 6610 Greig Street #102		Amount of Each Disbursement this Period 170.00
City Seat Pleasant	State MD Zip Code 20743	
Purpose of Disbursement canvasser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Marcia Newman</b>		<b>Transaction ID: D11782</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 3402 Lynne Have Drive		Amount of Each Disbursement this Period 50.00
City Baltimore	State MD Zip Code 21244	
Purpose of Disbursement canvasser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	420.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Marcia Newman</b>		<b>Transaction ID: D11903</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 3402 Lynne Have Drive		Amount of Each Disbursement this Period 40.00
City Baltimore State MD Zip Code 21244	Purpose of Disbursement canvasser	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Next Big Thing</b>		<b>Transaction ID: D11868</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 23 North King Street		Amount of Each Disbursement this Period 16874.25
City Leesburg State VA Zip Code 20176	Purpose of Disbursement dial in phone system	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Next Big Thing</b>		<b>Transaction ID: D11968</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 23 North King Street		Amount of Each Disbursement this Period 7352.25
City Leesburg State VA Zip Code 20176	Purpose of Disbursement dial in phone system	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	24266.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 205

<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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Samuel Novey</b>		<b>Transaction ID: D12052</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 4828 Keswick Road		Amount of Each Disbursement this Period 692.62
City Baltimore State MD Zip Code 21210	Category/ Type	
Purpose of Disbursement payroll		
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) ▼	
Full Name (Last, First, Middle Initial) <b>B. Ernest Obong</b>		<b>Transaction ID: D11783</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 9118 McHenry Lane		Amount of Each Disbursement this Period 300.00
City Lanham State MD Zip Code 20706	Category/ Type	
Purpose of Disbursement canvasser		
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) ▼	
Full Name (Last, First, Middle Initial) <b>C. Neil Oleson</b>		<b>Transaction ID: D12053</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 400 North Charles Street		Amount of Each Disbursement this Period 923.50
City Baltimore State MD Zip Code 21218	Category/ Type	
Purpose of Disbursement payroll		
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) ▼	

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

**1916.12**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Charles Ongele</b>		<b>Transaction ID: D11745</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 12301 Kings Valley Court		Amount of Each Disbursement this Period 108.00
City Mitchellville State MD Zip Code 20721	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Charles Ongele</b>		<b>Transaction ID: D11840</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 12301 Kings Valley Court		Amount of Each Disbursement this Period 100.00
City Mitchellville State MD Zip Code 20721	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Paul Osei</b>		<b>Transaction ID: D11746</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 11308 Glendale Ridge Road		Amount of Each Disbursement this Period 100.00
City Glendale State MD Zip Code 20769	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	308.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Paul Osei</b> Full Name (Last, First, Middle Initial) Mailing Address 11308 Glendale Ridge Road City Glendale State MD Zip Code 20769 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11841</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 150.00 Category/Type
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<b>B. Jamal Paddie</b> Full Name (Last, First, Middle Initial) Mailing Address 609 Falls Lake Drive City Mitchellville State MD Zip Code 20721 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11842</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 50.00 Category/Type
--	--	--

<b>C. Carlos Parker</b> Full Name (Last, First, Middle Initial) Mailing Address 1520 Pentridge Rd # 303C City Baltimore State MD Zip Code 21239 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11805</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 60.00 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	260.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Juan Pearson</b> Full Name (Last, First, Middle Initial) Mailing Address 1700 E Cold Springs Land City Baltimore State MD Zip Code 21251 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11806</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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<b>B. James Pegues</b> Full Name (Last, First, Middle Initial) Mailing Address 14810 Peppertree Drive City Bowie State MD Zip Code 20721 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11844</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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<b>C. Robert Pegues</b> Full Name (Last, First, Middle Initial) Mailing Address 931 Millponds Court City Bowie State MD Zip Code 20721 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11843</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	310.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mr. Charles H Phillips, Jr</b>		<b>Transaction ID: D11771</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 7945 Old Receiver Road		Amount of Each Disbursement this Period 350.00
City Frederick	State MD	
Zip Code 21702		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Tiffani Pitts</b>		<b>Transaction ID: D11845</b> Date of Disbursement 10 / 06 / 2006
Mailing Address PO Box 441		Amount of Each Disbursement this Period 230.00
City Frankford	State DE	
Zip Code 19945		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mark Pollock</b>		<b>Transaction ID: D11784</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 1715 B Fountain Rockway		Amount of Each Disbursement this Period 524.00
City Edgewood	State MD	
Zip Code 21040		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1104.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mark Pollock</b>		<b>Transaction ID: D11902</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1715 B Fountain Rockway		Amount of Each Disbursement this Period 396.00
City Edgewood State MD Zip Code 21040	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jason Powell</b>		<b>Transaction ID: D12002</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 5959 Grand legacy Drive		Amount of Each Disbursement this Period 826.00
City Maineville State OH Zip Code 45039	Purpose of Disbursement payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Keenan Powell</b>		<b>Transaction ID: D11846</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 10324 Sea Pines Drive		Amount of Each Disbursement this Period 220.00
City Bowie State MD Zip Code 20721	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1442.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Nate Pretl</b> Full Name (Last, First, Middle Initial) Mailing Address 6005 Clearspring Road City Baltimore State MD Zip Code 21212 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D12003</b> Date of Disbursement 10 / 13 / 2006 Amount of Each Disbursement this Period 782.51 Category/Type
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<b>B. Pringle Communications</b> Full Name (Last, First, Middle Initial) Mailing Address 717 D Street NW 5th Floor City Washington State DC Zip Code 20004 Purpose of Disbursement canvass piece exempt Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11965</b> Date of Disbursement 10 / 16 / 2006 Amount of Each Disbursement this Period 9890.00 Category/Type
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<b>C. Reach Out Communications</b> Full Name (Last, First, Middle Initial) Mailing Address 300 Merrie Hunt Drive City Timonium State MD Zip Code 21093 Purpose of Disbursement database development Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11963</b> Date of Disbursement 10 / 14 / 2006 Amount of Each Disbursement this Period 5864.46 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	16536.97
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Andrew Remo</b>		<b>Transaction ID: D12044</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 1422 11th Street NW #1		Amount of Each Disbursement this Period 867.25
City Washington State DC Zip Code 20001	Purpose of Disbursement payroll 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) ▼	
Category/Type		
Disbursement For:		

Full Name (Last, First, Middle Initial) <b>B. Antwan Richardson</b>		<b>Transaction ID: D11747</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 5609 Gloria Drive		Amount of Each Disbursement this Period 150.00
City Camp Springs State MD Zip Code 20746	Purpose of Disbursement canvasser 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) ▼	
Category/Type		
Disbursement For:		

Full Name (Last, First, Middle Initial) <b>C. Antwan Richardson</b>		<b>Transaction ID: D11847</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 5609 Gloria Drive		Amount of Each Disbursement this Period 150.00
City Camp Springs State MD Zip Code 20746	Purpose of Disbursement canvasser 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) ▼	
Category/Type		
Disbursement For:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1167.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Brian Rogers</b> Full Name (Last, First, Middle Initial) Mailing Address 7906 Roxbury Court City Hyattsville State MD Zip Code 20785 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D12004</b> Date of Disbursement 10 / 13 / 2006 Amount of Each Disbursement this Period 923.50 Category/Type
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<b>B. Olumayowa Rotimi</b> Full Name (Last, First, Middle Initial) Mailing Address 1111 University BLVD # 1205 City Silver Spring State MD Zip Code 20902 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11878</b> Date of Disbursement 10 / 12 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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<b>C. Brian Savoy</b> Full Name (Last, First, Middle Initial) Mailing Address 8800 Edison Lane City Clinton State MD Zip Code 20735 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11748</b> Date of Disbursement 10 / 05 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1103.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Andre Sawyer</b>		<b>Transaction ID: D11785</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 1516 N Broadway		Amount of Each Disbursement this Period 210.00
City Baltimore State MD Zip Code 21213	Purpose of Disbursement canvasser	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Andre Sawyer</b>		<b>Transaction ID: D11901</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 1516 N Broadway		Amount of Each Disbursement this Period 250.00
City Baltimore State MD Zip Code 21213	Purpose of Disbursement canvasser	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jennifer Sconyers</b>		<b>Transaction ID: D12005</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 8108 Greenwood Avenue #5		Amount of Each Disbursement this Period 1099.78
City Takoma Park State MD Zip Code 20912	Purpose of Disbursement payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1559.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mr. Robert Scott</b>		<b>Transaction ID: D12045</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 4983 Lockord Drive		Amount of Each Disbursement this Period 743.30
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement payroll	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) <b>B. Davon Shell</b>		<b>Transaction ID: D11960</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 3821 Ravenwood Avenue		Amount of Each Disbursement this Period 50.00
City Baltimore	State MD Zip Code 21213	
Purpose of Disbursement canvasser	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) <b>C. Christal Shrader</b>		<b>Transaction ID: D12046</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 188 Main Street		Amount of Each Disbursement this Period 787.21
City Annapolis	State MD Zip Code 21401	
Purpose of Disbursement payroll	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1580.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Chablise Simuel</b>		<b>Transaction ID: D11958</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 1119 N Gilmore Street		Amount of Each Disbursement this Period 50.00
City Baltimore State MD Zip Code 21217	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Lynnard Slaughter</b>		<b>Transaction ID: D11914</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 16 Grantchester Pl G		Amount of Each Disbursement this Period 150.00
City Gaithersburg State MD Zip Code 20877	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Samantha Small</b>		<b>Transaction ID: D11957</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 3704 Lyndale Avenue		Amount of Each Disbursement this Period 50.00
City Baltimore State MD Zip Code 21213	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 205

<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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Adia Smith</b>		<b>Transaction ID: D12006</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 6163 Wooster Avenue		Amount of Each Disbursement this Period 805.37
City Los Angeles	State CA	
Zip Code 90056	Purpose of Disbursement payroll	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Henry Smith</b>		<b>Transaction ID: D11848</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 6911 Lyle Street		Amount of Each Disbursement this Period 150.00
City Lanham	State MD	
Zip Code 20706	Purpose of Disbursement canvasser	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Iesha Smith</b>		<b>Transaction ID: D11786</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 4315 Perkton Street		Amount of Each Disbursement this Period 50.00
City Baltimore	State MD	
Zip Code 21229	Purpose of Disbursement canvasser	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1005.37
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Leshia Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 4315 Perkton Street City Baltimore State MD Zip Code 21229 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11900</b> Date of Disbursement 10 / 12 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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<b>B. Mary Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 4400 Marble Hall Road City Baltimore State MD Zip Code 21218 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11954</b> Date of Disbursement 10 / 14 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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<b>C. Russell Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 1706 Bethel Street City Baltimore State MD Zip Code 21213 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11956</b> Date of Disbursement 10 / 14 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Yvette Snipes</b>		<b>Transaction ID: D11899</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1516 N Broadway		Amount of Each Disbursement this Period 250.00
City Baltimore State MD Zip Code 21213	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sidney Snow</b>		<b>Transaction ID: D11787</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 2704 W Baltimore Street		Amount of Each Disbursement this Period 150.00
City Baltimore State MD Zip Code 21223	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Sidney Snow</b>		<b>Transaction ID: D11898</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 2704 W Baltimore Street		Amount of Each Disbursement this Period 250.00
City Baltimore State MD Zip Code 21223	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Ellen Solomon</b> Full Name (Last, First, Middle Initial) Mailing Address 15101 Interlachen Drive City Silver Spring State MD Zip Code 20906 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11866</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
--	--	---

<b>B. Kendell Sorrell</b> Full Name (Last, First, Middle Initial) Mailing Address 2020 St Bernardine Way City Capital Heights State MD Zip Code 20743 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11849</b> Date of Disbursement 10 / 06 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
---	--	---

<b>C. Jerome Spence</b> Full Name (Last, First, Middle Initial) Mailing Address 5501 Arabis Avenue City Baltimore State MD Zip Code 21214 Purpose of Disbursement Canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11953</b> Date of Disbursement 10 / 14 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
---	--	---

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Maria Spence</b>		<b>Transaction ID: D11788</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 5501 Arabia Ave		Amount of Each Disbursement this Period 40.00
City Baltimore State MD Zip Code 21214	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Maria Spence</b>		<b>Transaction ID: D11897</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 5501 Arabia Ave		Amount of Each Disbursement this Period 475.00
City Baltimore State MD Zip Code 21214	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Kristina Spiegel</b>		<b>Transaction ID: D12007</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 820 N Carolina Avenue SE #2		Amount of Each Disbursement this Period 826.00
City Washington State DC Zip Code 20003	Purpose of Disbursement payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1341.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Lakshmi Sridaran</b>		<b>Transaction ID: D11996</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 7310 Maple Avenue		Amount of Each Disbursement this Period 1186.71
City Takoma Park State MD Zip Code 20912	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jonathan Stein</b>		<b>Transaction ID: D11813</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 11323 Rolling House Road		Amount of Each Disbursement this Period 372.00
City Rockville State MD Zip Code 20852	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Andre Stevens</b>		<b>Transaction ID: D11896</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 3628 Dolfield Avenue		Amount of Each Disbursement this Period 300.00
City Baltimore State MD Zip Code 21215	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1858.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Carletta Stokes</b>		<b>Transaction ID: D11952</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 4403 Springdale Avenue		Amount of Each Disbursement this Period 90.00
City Baltimore State MD Zip Code 21207	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Corey Stokes</b>		<b>Transaction ID: D11951</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 4403 Springdale Avenue		Amount of Each Disbursement this Period 90.00
City Baltimore State MD Zip Code 21207	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Nickom Sukachevin</b>		<b>Transaction ID: D12008</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 9612 Percussion Way		Amount of Each Disbursement this Period 1144.65
City Vienna State VA Zip Code 22182	Purpose of Disbursement payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1324.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Hakim Sutton</b>		<b>Transaction ID: D12009</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1111 M Street NW #2		Amount of Each Disbursement this Period 1547.58
City Washington State DC Zip Code 20005	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. John Swanwon</b>		<b>Transaction ID: D12010</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 2596 Chain Bridge		Amount of Each Disbursement this Period 425.08
City Vienna State VA Zip Code 22181	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mujahid Taalibdin</b>		<b>Transaction ID: D11749</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 9811 53rd Avenue		Amount of Each Disbursement this Period 250.00
City College Park State MD Zip Code 20740	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2222.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mujahid Taalibdin</b>		<b>Transaction ID: D11850</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 9811 53rd Avenue		Amount of Each Disbursement this Period 100.00
City College Park	State MD Zip Code 20740	
Purpose of Disbursement canvasser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Aaron Talley</b>		<b>Transaction ID: D11950</b> Date of Disbursement 10 / 14 / 2006
Mailing Address 2541 Howard Street		Amount of Each Disbursement this Period 200.00
City Baltimore	State MD Zip Code 21218	
Purpose of Disbursement canvasser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Chester Talley</b>		<b>Transaction ID: D11789</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 3015 White Avenue		Amount of Each Disbursement this Period 340.00
City Baltimore	State MD Zip Code 21218	
Purpose of Disbursement canvasser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	640.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Chester Talley</b>		<b>Transaction ID: D11895</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 3015 White Avenue		Amount of Each Disbursement this Period 250.00
City Baltimore	State MD	
Zip Code 21218		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bricen Tate</b>		<b>Transaction ID: D11949</b> Date of Disbursement 10 / 14 / 2006
Mailing Address 1700 E Coldspring Lane		Amount of Each Disbursement this Period 50.00
City Baltimore	State MD	
Zip Code 21251		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. El Drece Taylor</b>		<b>Transaction ID: D11948</b> Date of Disbursement 10 / 14 / 2006
Mailing Address 3174B Bancroft Courts		Amount of Each Disbursement this Period 50.00
City Philadelphia	State PA	
Zip Code 19132		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. James Taylor-Copeland</b>		<b>Transaction ID: D11814</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 6203 Wagner Lane		Amount of Each Disbursement this Period 288.00
City Bethesda	State MD	
Zip Code 20816	Purpose of Disbursement canvasser	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Travis Tazelaar</b>		<b>Transaction ID: D12011</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 19 Elmwood Road		Amount of Each Disbursement this Period 1477.00
City Baltimore	State MD	
Zip Code 21210	Purpose of Disbursement payroll	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TyJuan Thigpen</b>		<b>Transaction ID: D11851</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 10234 Prince Place #T2		Amount of Each Disbursement this Period 50.00
City Largo	State MD	
Zip Code 20774	Purpose of Disbursement canvasser	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1815.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 133 / 205

<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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Wayne Thomas</b>		<b>Transaction ID: D11947</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 2124 W Baltimore Street		Amount of Each Disbursement this Period 150.00
City Baltimore State MD Zip Code 21223		
Purpose of Disbursement canvasser	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Alana Timmerman</b>		<b>Transaction ID: D11852</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 4209 Russell Avenue #5		Amount of Each Disbursement this Period 228.00
City Mt Rainier State MD Zip Code 20712		
Purpose of Disbursement canvasser	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Alberto Torres</b>		<b>Transaction ID: D11946</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 1403 Kings Way Road		Amount of Each Disbursement this Period 50.00
City Baltimore State MD Zip Code 21218		
Purpose of Disbursement canvasser	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	428.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 134 / 205

<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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Annette Torres</b>		<b>Transaction ID: D12012</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 417 Balboa		Amount of Each Disbursement this Period 763.93
City El Paso	State TX	
Zip Code 79912	Purpose of Disbursement payroll	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Khadijah Tribble</b>		<b>Transaction ID: D12013</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 2500 Lakehurst Avenue		Amount of Each Disbursement this Period 775.90
City Forestville	State MD	
Zip Code 20747	Purpose of Disbursement payroll	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mary Trice</b>		<b>Transaction ID: D11790</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 411 N Chester Street		Amount of Each Disbursement this Period 150.00
City Baltimore	State MD	
Zip Code 21231	Purpose of Disbursement canvasser	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1689.83
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mary Trice</b>		<b>Transaction ID: D11894</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 411 N Chester Street		Amount of Each Disbursement this Period 250.00
City Baltimore	State MD	
Zip Code 21231		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mujahid Umar</b>		<b>Transaction ID: D11879</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 1401 Foggy Glen Ct		Amount of Each Disbursement this Period 60.00
City Silver Spring	State MD	
Zip Code 20906		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Faouly Umoja</b>		<b>Transaction ID: D11791</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 1932 E 30th Street		Amount of Each Disbursement this Period 360.00
City Baltimore	State MD	
Zip Code 21218		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	670.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Faouly Umoja</b>		<b>Transaction ID: D11893</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1932 E 30th Street		Amount of Each Disbursement this Period 360.00
City Baltimore State MD Zip Code 21218	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Nataki Umoja</b>		<b>Transaction ID: D11792</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 1932 E 30th Street		Amount of Each Disbursement this Period 200.00
City Baltimore State MD Zip Code 21218	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Nataki Umoja</b>		<b>Transaction ID: D11892</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1932 E 30th Street		Amount of Each Disbursement this Period 200.00
City Baltimore State MD Zip Code 21218	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	760.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Sule Umoja</b>		<b>Transaction ID: D11793</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 1944 West Lanvale Street		Amount of Each Disbursement this Period 200.00	
City Baltimore State MD Zip Code 21217	Purpose of Disbursement canvasser Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Sule Umoja</b>		<b>Transaction ID: D11891</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 1944 West Lanvale Street		Amount of Each Disbursement this Period 200.00	
City Baltimore State MD Zip Code 21217	Purpose of Disbursement Canvasser Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Muntasir Umoja Sr</b>		<b>Transaction ID: D11794</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 1655 N Smallwood Street		Amount of Each Disbursement this Period 360.00	
City Baltimore State MD Zip Code 21216	Purpose of Disbursement canvasser Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	760.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Muntasir Umoja Sr</b>		<b>Transaction ID: D11890</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 1655 N Smallwood Street		Amount of Each Disbursement this Period 576.00
City Baltimore	State MD	
Zip Code 21216		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Danielle Vaughn</b>		<b>Transaction ID: D11945</b> Date of Disbursement 10 / 14 / 2006
Mailing Address 2818 W North Avenue		Amount of Each Disbursement this Period 50.00
City Baltimore	State MD	
Zip Code 21216		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Brandon Walker</b>		<b>Transaction ID: D11944</b> Date of Disbursement 10 / 14 / 2006
Mailing Address 2315 Ashburton		Amount of Each Disbursement this Period 40.00
City Baltimore	State MD	
Zip Code 21216		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	666.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 139 / 205

<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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Mr. Derek Walker</b>		<b>Transaction ID: D11980</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 2 Maryland Avenue Apartment 23		Amount of Each Disbursement this Period 2620.90
City Annapolis State MD Zip Code 21401	Purpose of Disbursement payroll Candidate Name <input type="checkbox"/> 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Heather Wallace</b>		<b>Transaction ID: D11795</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 1944 W Lanvale Street		Amount of Each Disbursement this Period 150.00
City Baltimore State MD Zip Code 21217	Purpose of Disbursement canvasser Candidate Name <input type="checkbox"/> 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Heather Wallace</b>		<b>Transaction ID: D11889</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 1944 W Lanvale Street		Amount of Each Disbursement this Period 200.00
City Baltimore State MD Zip Code 21217	Purpose of Disbursement canvasser Candidate Name <input type="checkbox"/> 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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2970.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. James Edward Walsh</b>		<b>Transaction ID: D12047</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1711 Mass Avenue NW #130		Amount of Each Disbursement this Period 787.21
City Washington State DC Zip Code 20036	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Brian Walters</b>		<b>Transaction ID: D11815</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 311 Maryland Avenue		Amount of Each Disbursement this Period 200.00
City Washington State DC Zip Code 20002	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Alexander Washington</b>		<b>Transaction ID: D11943</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 2529 W Fairmount Avenue		Amount of Each Disbursement this Period 300.00
City Baltimore State MD Zip Code 21223	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1287.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Brian Webb</b>		<b>Transaction ID: D11942</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 901 Nottingham Road # 3A		Amount of Each Disbursement this Period 220.00
City Baltimore State MD Zip Code 21229	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Elijah Weber</b>		<b>Transaction ID: D11941</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 1621 Park Avenue		Amount of Each Disbursement this Period 50.00
City Baltimore State MD Zip Code 21217	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Martin Weil</b>		<b>Transaction ID: D11816</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 9332 Harvey Road		Amount of Each Disbursement this Period 60.00
City Silver Spring State MD Zip Code 20910	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	330.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Julius West</b> Full Name (Last, First, Middle Initial) Mailing Address 6104 Bur Trail City Raleigh State NC Zip Code 27616 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D12014</b> Date of Disbursement 10 / 13 / 2006 Amount of Each Disbursement this Period 867.25 Category/Type
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<b>B. Breetta White</b> Full Name (Last, First, Middle Initial) Mailing Address 1213 Ramgje Wood Road City Baltimore State MD Zip Code 21239 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11939</b> Date of Disbursement 10 / 14 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
--	--	---

<b>C. Byron White</b> Full Name (Last, First, Middle Initial) Mailing Address 720 Whitmore Avenue City Baltimore State MD Zip Code 21216 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11940</b> Date of Disbursement 10 / 14 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1167.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Lily Whitesell</b>		<b>Transaction ID: D11853</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 811 Whann Avenue		Amount of Each Disbursement this Period 438.00
City McLean State VA Zip Code 22101	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sidtiea Whylie</b>		<b>Transaction ID: D11796</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 1201 Harwood Avenue # B7		Amount of Each Disbursement this Period 228.00
City Baltimore State MD Zip Code 21239	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Sidtiea Whylie</b>		<b>Transaction ID: D11888</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 1201 Harwood Avenue # B7		Amount of Each Disbursement this Period 240.00
City Baltimore State MD Zip Code 21239	Purpose of Disbursement canvasser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	906.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Hurley Williams</b>		<b>Transaction ID: D11797</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 1801 Sherwood Avenue # b		Amount of Each Disbursement this Period 240.00
City Baltimore State MD Zip Code 21239	Category/ Type	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hurley Williams</b>		<b>Transaction ID: D11887</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1801 Sherwood Avenue # b		Amount of Each Disbursement this Period 150.00
City Baltimore State MD Zip Code 21239	Category/ Type	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jeremiah Williams</b>		<b>Transaction ID: D11935</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 2331 Ashburtone Street		Amount of Each Disbursement this Period 100.00
City Baltimore State MD Zip Code 21216	Category/ Type	
Purpose of Disbursement canvasser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	490.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Michael Williams</b>		<b>Transaction ID: D12015</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 9109 norris Twilley Road		Amount of Each Disbursement this Period 942.06
City State Zip Code Mardela Springs MD 21837	Purpose of Disbursement payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Nnamdi Williams</b>		<b>Transaction ID: D11934</b> Date of Disbursement 10 / 14 / 2006
Mailing Address 3330 Ravenwood Avenue		Amount of Each Disbursement this Period 60.00
City State Zip Code Baltimore MD 21213	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Shanay Williams</b>		<b>Transaction ID: D11936</b> Date of Disbursement 10 / 14 / 2006
Mailing Address 2456 W Coldspring Lane		Amount of Each Disbursement this Period 200.00
City State Zip Code Baltimore MD 21215	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1202.06
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Vinnie Williams</b>		<b>Transaction ID: D11938</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 1426 Winston Avenue		Amount of Each Disbursement this Period 50.00
City Baltimore State MD Zip Code 21234		
Purpose of Disbursement Canvasser	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Anthony Williams III</b>		<b>Transaction ID: D11937</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 30 Dowling Circle #B1		Amount of Each Disbursement this Period 180.00
City Parkville State MD Zip Code 21234		
Purpose of Disbursement canvasser	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Pamela Williamson</b>		<b>Transaction ID: D11798</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 2118 Emerson Street		Amount of Each Disbursement this Period 150.00
City Baltimore State MD Zip Code 21223		
Purpose of Disbursement canvasser	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	380.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Pamela Williamson</b>		<b>Transaction ID: D11886</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 2118 Emerson Street		Amount of Each Disbursement this Period 150.00
City Baltimore State MD Zip Code 21223	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Annette Wilson</b>		<b>Transaction ID: D11930</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 229 N Mount Street		Amount of Each Disbursement this Period 100.00
City Baltimore State MD Zip Code 21223	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Debra Wilson</b>		<b>Transaction ID: D11885</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1944 Lanvale Street		Amount of Each Disbursement this Period 326.00
City Baltimore State MD Zip Code 21217	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	576.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. La'Keisha Wilson</b> Full Name (Last, First, Middle Initial) Mailing Address 3501 W Lexington Street City Baltimore State MD Zip Code 21229 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11932</b> Date of Disbursement 10 / 14 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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<b>B. Marlo Wilson</b> Full Name (Last, First, Middle Initial) Mailing Address 790 W Cross Street City Baltimore State MD Zip Code 21230 Purpose of Disbursement Canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11933</b> Date of Disbursement 10 / 14 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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<b>C. Monica Wilson</b> Full Name (Last, First, Middle Initial) Mailing Address 100 W 25th Street City Baltimore State MD Zip Code 21218 Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D11931</b> Date of Disbursement 10 / 14 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Winning Connections</b>		<b>Transaction ID:</b> D11867 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 209 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 4187.20
City Washington State DC Zip Code 20003	Purpose of Disbursement Blind ID Calls	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Winning Directions</b>		<b>Transaction ID:</b> D11883 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 2700 South Zuinay Street		Amount of Each Disbursement this Period 737.95
City Arlington State VA Zip Code 22206	Purpose of Disbursement postage for mail piece	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Tyrome Witherspoon</b>		<b>Transaction ID:</b> D11799 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 1201 Harwood Avenue # B7		Amount of Each Disbursement this Period 190.00
City Baltimore State MD Zip Code 21239	Purpose of Disbursement canvasser	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5115.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Tyrome Witherspoon</b>		<b>Transaction ID: D11884</b> Date of Disbursement 10 / 12 / 2006
Mailing Address 1201 Harwood Avenue # B7		Amount of Each Disbursement this Period 200.00
City Baltimore State MD Zip Code 21239	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Patrick Witte</b>		<b>Transaction ID: D11817</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 2810 Jutland Road		Amount of Each Disbursement this Period 120.00
City Kensington State MD Zip Code 20895	Purpose of Disbursement canvasser	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Deborah Wohl</b>		<b>Transaction ID: D12054</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 4313 Knox Road		Amount of Each Disbursement this Period 402.75
City College Park State MD Zip Code 20740	Purpose of Disbursement payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	722.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. Aaron Wolf</b>		<b>Transaction ID: D11818</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 2621 Washington Avenue		Amount of Each Disbursement this Period 456.00
City Chevy Chase	State MD	
Zip Code 20815		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eric Wright</b>		<b>Transaction ID: D11800</b> Date of Disbursement 10 / 06 / 2006
Mailing Address 2319-F Salem Village Road		Amount of Each Disbursement this Period 136.00
City Parkville	State MD	
Zip Code 21231		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. St Clair Wright</b>		<b>Transaction ID: D11856</b> Date of Disbursement 10 / 05 / 2006
Mailing Address 10502 Waterpoint		Amount of Each Disbursement this Period 120.00
City Mitchellville	State MD	
Zip Code 20721		
Purpose of Disbursement canvasser		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	712.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

Full Name (Last, First, Middle Initial) <b>A. St Clair Wright</b>		<b>Transaction ID: D11855</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 10502 Waterpoint		Amount of Each Disbursement this Period 120.00
City Mitchellville	State MD Zip Code 20721	
Purpose of Disbursement canvasser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Terri Wright</b>		<b>Transaction ID: D11928</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 910 Evesham Avenue		Amount of Each Disbursement this Period 100.00
City Baltimore	State MD Zip Code 21212	
Purpose of Disbursement canvasser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Valarie Wright</b>		<b>Transaction ID: D11927</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6
Mailing Address 910 Evesham Avenue		Amount of Each Disbursement this Period 50.00
City Baltimore	State MD Zip Code 21212	
Purpose of Disbursement canvasser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	270.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b> Full Name (Last, First, Middle Initial) Burl Yates</p> <p>Mailing Address 4601 Monument</p> <p>City Baltimore State MD Zip Code 21205</p> <p>Purpose of Disbursement canvasser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID:</b> D11926 <b>Date of Disbursement</b> 10 / 12 / 2006</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>Category/ Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Cynthia Young</p> <p>Mailing Address 1921 E 30th Street</p> <p>City Baltimore State MD Zip Code 21218</p> <p>Purpose of Disbursement canvasser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID:</b> D11801 <b>Date of Disbursement</b> 10 / 06 / 2006</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>Category/ Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
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**SUBTOTAL** of Disbursements This Page (optional) .....

100.00

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

416761.39

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

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 FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) Democratic State Central Committee of Maryland		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:	Full Name of Subordinate Committee Democratic State Central Committee of Maryland	
	Mailing Address 188 Main Street, Suite 1	
	City Annapolis	State ZIP Code MD 21401

Full Name (Last, First, Middle Initial) of Each Payee Media Strategies and Research		Purpose of Expenditure Mail piece Ben Cardin	Category/Type
Mailing Address 318 Massachusetts Avenue NE Washington, DC 20002		Date MM / DD / YYYY 10 / 06 / 2006	
City Washington	State ZIP Code DC 20002		
Name of Federal Candidate Supported Benjamin Cardin	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: MD	Amount 637000.00
Aggregate General Election Expenditure for this Candidate ▶	637000.00		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
<b>Transaction ID: D11869</b>			

SUBTOTAL of Expenditures This Page (optional) .....	637000.00
TOTAL This Period (last page this line number only) .....	637000.00

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Democratic State Central Committee of Maryland

NAME OF ACCOUNT Non Federal Administrative	DATE OF RECEIPT M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 117249.81
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BREAKDOWN OF TRANSFER RECEIVED		
<b>i) Total Administrative</b> .....		117249.81 Transaction ID: T188
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
<b>TOTAL</b> This Period (Administrative) .....	117249.81
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	117249.81

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Advance Business Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1075 York Road			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Cockeysville	MD	21030			
Purpose of Disbursement: Copier			Transaction ID: D11696H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
209.60		788.50		998.10

<b>B. Full Name (Last, First, Middle Initial)</b> Advance Business Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1075 York Road			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Cockeysville	MD	21030			
Purpose of Disbursement: copier toner			Transaction ID: D11657H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.16		68.32		86.48

<b>C. Full Name (Last, First, Middle Initial)</b> Allied Waste			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 830135			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Baltimore	MD	21283			
Purpose of Disbursement: recycling			Transaction ID: D11639H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.64		36.28		45.92

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
237.40		893.10		1130.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Elizabeth Aloi			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2611 Admans Mill Road NW #208			Allocated Activity or Event Year-To-Date 948060.86		
City Washington	State DC	Zip Code 20009	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: cell phone see memo entry			Transaction ID: D11652H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>B. Full Name (Last, First, Middle Initial)</b> Elizabeth Aloi			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2611 Admans Mill Road NW #208			Allocated Activity or Event Year-To-Date 948060.86		
City Washington	State DC	Zip Code 20009	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: mileage			Transaction ID: D11637H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.42		35.46		44.88

<b>C. Full Name (Last, First, Middle Initial)</b> Elizabeth Aloi			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2611 Admans Mill Road NW #208			Allocated Activity or Event Year-To-Date 948060.86		
City Washington	State DC	Zip Code 20009	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: supplies see memo entries			Transaction ID: D11689H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.45		385.45		487.90

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.57		476.21		602.78

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A. Full Name (Last, First, Middle Initial)**  
Elizabeth Aloï

Mailing Address  
2611 Admans Mill Road NW #208

City	State	Zip Code	Category/ Type
Washington	DC	20009	

Purpose of Disbursement:  
reimburse see memo entry

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
948060.86

Date   /   /      
**Transaction ID:** D11661H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.88		78.55		99.43

**B. Full Name (Last, First, Middle Initial)**  
Scott Arceneaux

Mailing Address  
8516 Hazelwood Drive

City	State	Zip Code	Category/ Type
Bethesda	MD	20814	

Purpose of Disbursement:  
political consultant

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
948060.86

Date   /   /      
**Transaction ID:** D11628H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

**C. Full Name (Last, First, Middle Initial)**  
Bank Building LLC c/o Michaels Mngmnt

Mailing Address  
4640 Forbes Blvd #300

City	State	Zip Code	Category/ Type
Lanham	MD	20706	

Purpose of Disbursement:  
Rent

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
948060.86

Date   /   /      
**Transaction ID:** D11704H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
734.28		2762.32		3496.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1007.16		3788.87		4796.03

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Bank of America			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 27025			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Richmond	VA	23261		
Purpose of Disbursement: payroll taxes under 25% FEA			Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>	
Activity or Event Identifier: Administrative			Transaction ID: D12061H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4613.86		17356.91		21970.77

<b>B. Full Name (Last, First, Middle Initial)</b> Brad Bauman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1615 Q Street NW # 901			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Washington	DC	20009		
Purpose of Disbursement: political consultant			Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>	
Activity or Event Identifier: Administrative			Transaction ID: D11627H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2100.00		7900.00		10000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Mark Bochkis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2445 Lyttonsville Road # 606			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Silver Spring	MD	20910		
Purpose of Disbursement: mileage			Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>	
Activity or Event Identifier: Administrative			Transaction ID: D11658H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.70		70.36		89.06

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6732.56		25327.27		32059.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Meredith F. Bowman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8244			Allocated Activity or Event Year-To-Date 948060.86		
City Elkridge	State MD	Zip Code 21075	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: mileage			Transaction ID: D11626H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.40		24.10		30.50

<b>B. Full Name (Last, First, Middle Initial)</b> Meredith F. Bowman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8244			Allocated Activity or Event Year-To-Date 948060.86		
City Elkridge	State MD	Zip Code 21075	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D11976H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
458.40		1724.50		2182.90

<b>C. Full Name (Last, First, Middle Initial)</b> James Bragdon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1416 Bay Head Road			Allocated Activity or Event Year-To-Date 948060.86		
City Annapolis	State MD	Zip Code 21401	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12030H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.98		583.02		738.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
619.78		2331.62		2951.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Camelot of Upper Marlboro			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13901 Central Ave			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> D11609H4	
Upper Marlboro	MD	20774		
Purpose of Disbursement: venue rental non fundraiser			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1245.27		4684.60		5929.87

<b>B. Full Name (Last, First, Middle Initial)</b> Camelot of Upper Marlboro			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13901 Central Ave			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> D11614H4	
Upper Marlboro	MD	20774		
Purpose of Disbursement: venue rental non fundraising			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
401.86		1511.77		1913.63

<b>C. Full Name (Last, First, Middle Initial)</b> Benjamin Chapin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 835 Clafin Avenue			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> D11659H4	
Mamaroneck	NY	10543		
Purpose of Disbursement: mileage			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.00		75.26		95.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1667.13		6271.63		7938.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Benjamin Chapin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 835 Claflin Avenue			Allocated Activity or Event Year-To-Date 948060.86		
City Mamaroneck	State NY	Zip Code 10543	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11679H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.02		188.20		238.22

<b>B. Full Name (Last, First, Middle Initial)</b> Cingular Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8220			Allocated Activity or Event Year-To-Date 948060.86		
City Aurora	State IL	Zip Code 60572	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: cell phone see Benson Erwin			Transaction ID: D11651H4		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>C. Full Name (Last, First, Middle Initial)</b> Cingular Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8220			Allocated Activity or Event Year-To-Date 948060.86		
City Aurora	State IL	Zip Code 60572	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: wireless phone			Transaction ID: D11695H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
174.00		654.61		828.61

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
224.02		842.81		1066.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> City of Annapolis			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 150 Gorman Street			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Annapolis	MD	21401		
Purpose of Disbursement: parking			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D11693H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.35		580.65		735.00

<b>B. Full Name (Last, First, Middle Initial)</b> Mark Clack			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 135 Joan Street			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Princeton	NJ	08542		
Purpose of Disbursement: political consultant			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D11700H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
472.50		1777.50		2250.00

<b>C. Full Name (Last, First, Middle Initial)</b> Samuel Clark			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7540 Hampden Lane			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Bethesda	MD	20814		
Purpose of Disbursement: payroll under 25% FEA			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D12029H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
159.82		601.26		761.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
786.67		2959.41		3746.08

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> CMC - Pearl LC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7300 Pearl Street			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Category/ Type		
Bethesda	MD	20814			
Purpose of Disbursement: rent			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Activity or Event Identifier: Administrative			Transaction ID: D11611H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
420.00		1580.00		2000.00

<b>B. Full Name (Last, First, Middle Initial)</b> John Coggin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 619 Maple Avenue			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Category/ Type		
Richmond	VA	23226			
Purpose of Disbursement: payroll under 25% FEA			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Activity or Event Identifier: Administrative			Transaction ID: D12031H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
169.47		637.57		807.04

<b>C. Full Name (Last, First, Middle Initial)</b> Jacob Colker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4129 N. Pulaski			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Category/ Type		
Chicago	IL	60641			
Purpose of Disbursement: payroll under 25% FEA			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Activity or Event Identifier: Administrative			Transaction ID: D12055H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
303.92		1143.34		1447.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
893.39		3360.91		4254.30

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A. Full Name (Last, First, Middle Initial)**  
Community Use of Public Facilities

Mailing Address  
600 Jefferson Plaxw #300

City	State	Zip Code	Category/ Type
Rockville	MD	20852	

Purpose of Disbursement:  
venue rental see Ken Reichard

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
948060.86

Date   /   /      
**Transaction ID:** D11718H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.45		389.17		423.50

**B. Full Name (Last, First, Middle Initial)**  
Copernicus Analytics

Mailing Address  
1522 U Street NW

City	State	Zip Code	Category/ Type
Washington	DC	20009	

Purpose of Disbursement:  
political consulting

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
948060.86

Date   /   /      
**Transaction ID:** D11962H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1470.00		5530.00		7000.00

**C. Full Name (Last, First, Middle Initial)**  
David Costello

Mailing Address  
4413 Wickford Road

City	State	Zip Code	Category/ Type
Baltimore	MD	21210	

Purpose of Disbursement:  
payroll under 25% FEA

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
948060.86

Date   /   /      
**Transaction ID:** D12032H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
335.00		1260.27		1595.27

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1805.00		6790.27		8595.27

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Deer Park Water			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 52271			Allocated Activity or Event Year-To-Date 948060.86	
City Fayetteville	State AR	Zip Code 72701	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>	
Purpose of Disbursement: water			Transaction ID: D11638H4	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.45		35.55		45.00

<b>B. Full Name (Last, First, Middle Initial)</b> Moulin Desai			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11393 Liberty Street			Allocated Activity or Event Year-To-Date 948060.86	
City Fulton	State MD	Zip Code 20759	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>	
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12016H4	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.82		623.83		789.65

<b>C. Full Name (Last, First, Middle Initial)</b> Kelly Dirocco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3114 E Baltimore			Allocated Activity or Event Year-To-Date 948060.86	
City Baltimore	State MD	Zip Code 21224	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>	
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12020H4	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
237.30		892.71		1130.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
412.57		1552.09		1964.66

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Jill Downing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5609 Kolb Street			Allocated Activity or Event Year-To-Date 948060.86		
City Fairmont Height	State MD	Zip Code 20743	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: political consultant			Transaction ID: D11698H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

<b>B. Full Name (Last, First, Middle Initial)</b> DuClaw			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7000 Arundel Mills Circle, #R4			Allocated Activity or Event Year-To-Date 948060.86		
City Hanover	State MD	Zip Code 21076	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: staff lunch meeting			Transaction ID: D11715H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.61		58.77		74.38

<b>C. Full Name (Last, First, Middle Initial)</b> Kathleen Dunn			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1257 Pine Hill Drive			Allocated Activity or Event Year-To-Date 948060.86		
City Annapolis	State MD	Zip Code 21409	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12021H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
117.38		441.61		558.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
447.99		1685.38		2133.37

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Marc Edwards			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9885 Edisto Way			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21220	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11635H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.06		30.35		38.41

<b>B. Full Name (Last, First, Middle Initial)</b> Marc Edwards			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9885 Edisto Way			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21220	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11674H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.39		163.27		206.66

<b>C. Full Name (Last, First, Middle Initial)</b> Erik Zeil			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 38 Gorton Holden Terrace			Allocated Activity or Event Year-To-Date 948060.86		
City Warwick	State RI	Zip Code 02886	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12019H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
268.41		1009.77		1278.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
319.86		1203.39		1523.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Benson Erwin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6 West 39th Street			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21218	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: cell phone see memo entry			Transaction ID: D11650H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>B. Full Name (Last, First, Middle Initial)</b> Erin Eschenroeder			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1301 20th St NW			Allocated Activity or Event Year-To-Date 948060.86		
City Washington	State DC	Zip Code 20036	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: gas reimburse			Transaction ID: D11634H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		15.80		20.00

<b>C. Full Name (Last, First, Middle Initial)</b> Eutaw Property Enterprise			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3600 Clipper Mill Road # 220			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21211	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: rent			Transaction ID: D11619H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
192.15		722.85		915.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.05		793.95		1005.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Alan Forbes			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7902 Tiffany Lane			Allocated Activity or Event Year-To-Date 948060.86		
City Lanham	State MD	Zip Code 20706	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11654H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.18		57.12		72.30

<b>B. Full Name (Last, First, Middle Initial)</b> Trisch Gaines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1512 Rest Drive			Allocated Activity or Event Year-To-Date 948060.86		
City LaPlata	State MD	Zip Code 20264	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: cell phone see memo entry			Transaction ID: D11648H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>C. Full Name (Last, First, Middle Initial)</b> Jason Garner			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2403 Foster Place			Allocated Activity or Event Year-To-Date 948060.86		
City Temple Hills	State MD	Zip Code 20748	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: political consultant			Transaction ID: D11694H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.50		592.50		750.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
187.38		704.92		892.30

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Daniel Greeley			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8709 Cheshire Court			Allocated Activity or Event Year-To-Date 948060.86		
City Jessup	State MD	Zip Code 20794	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: mileage			Transaction ID: D11612H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.19		136.16		172.35

<b>B. Full Name (Last, First, Middle Initial)</b> Derrick Green			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 900 Fletcher Avenue			Allocated Activity or Event Year-To-Date 948060.86		
City Clinton	State MD	Zip Code 20735	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: political consultant			Transaction ID: D11629H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Marc Guido			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 611 West 33rd			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21211	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: mileage			Transaction ID: D11684H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.51		137.39		173.90

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1122.70		4223.55		5346.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Alexis Guild			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2401 Calvert St NW #416			Allocated Activity or Event Year-To-Date 948060.86		
City Washington	State DC	Zip Code 20008	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: political consultant			Transaction ID: D11702H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
525.00		1975.00		2500.00

<b>B. Full Name (Last, First, Middle Initial)</b> Jesse Haladay			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1810 Kenway Road			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21204	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: mileage			Transaction ID: D11683H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.60		228.00		288.60

<b>C. Full Name (Last, First, Middle Initial)</b> Jesse Haladay			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1810 Kenway Road			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21204	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: mileage			Transaction ID: D11656H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.71		66.65		84.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
603.31		2269.65		2872.96

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Monique Hall			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11411 Lake Arbor Way # 703			Allocated Activity or Event Year-To-Date 948060.86		
City Mitchellville	State MD	Zip Code 20721	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: political consultant			Transaction ID: D11686H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
87.57		329.43		417.00

<b>B. Full Name (Last, First, Middle Initial)</b> Harry Brown's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 66 State Street			Allocated Activity or Event Year-To-Date 948060.86		
City Annapolis	State MD	Zip Code 21401	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: Dinner meeting			Transaction ID: D11615H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.34		95.35		120.69

<b>C. Full Name (Last, First, Middle Initial)</b> Joel Hendricks			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4211 Colonial Road			Allocated Activity or Event Year-To-Date 948060.86		
City Pikesville	State MD	Zip Code 21208	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12056H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
274.67		1033.32		1307.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
387.58		1458.10		1845.68

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Douglas Hole			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 995 Headwater Road			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> D11721H4	
Annapolis	MD	21403		
Purpose of Disbursement: cell phone see memo entry			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>B. Full Name (Last, First, Middle Initial)</b> Bernard Holloway			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2709 Woodlake Road			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> D12033H4	
Mitchellville	MD	20721		
Purpose of Disbursement: payroll under 25% FEA			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.15		617.55		781.70

<b>C. Full Name (Last, First, Middle Initial)</b> Emmanuel Holmes			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3230 Pellham Avenue			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> D12034H4	
Baltimore	MD	21213		
Purpose of Disbursement: payroll under 25% FEA			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
342.92		1290.06		1632.98

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
521.77		1962.91		2484.68

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A. Full Name (Last, First, Middle Initial)**  
Homewood Suites

Mailing Address  
1181 Winterson Road

City Linthicum	State MD	Zip Code 21090	Category/ Type
Purpose of Disbursement: housing see Robert Mook			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
948060.86

Date   /   /      
**Transaction ID:** D11681H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.27		192.89		244.16

**B. Full Name (Last, First, Middle Initial)**  
Rachel Indek

Mailing Address  
516 S Robinson Street

City Baltimore	State MD	Zip Code 21224	Category/ Type
Purpose of Disbursement: payroll under 25% FEA			

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
948060.86

Date   /   /      
**Transaction ID:** D12035H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2469.30		9289.28		11758.58

**C. Full Name (Last, First, Middle Initial)**  
Intuit Supplies Group

Mailing Address  
PO Box 7850

City Mountain View	State CA	Zip Code 94039	Category/ Type
Purpose of Disbursement: check printing			

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
948060.86

Date   /   /      
**Transaction ID:** D11601H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.04		86.68		109.72

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2492.34		9375.96		11868.30

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Intuit Supplies Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7850			Allocated Activity or Event Year-To-Date 948060.86		
City Mountain View	State CA	Zip Code 94039	Date M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6		
Purpose of Disbursement: check printing			Transaction ID: D11623H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.39		50.39		63.78

<b>B. Full Name (Last, First, Middle Initial)</b> Intuit Supplies Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7850			Allocated Activity or Event Year-To-Date 948060.86		
City Mountain View	State CA	Zip Code 94039	Date M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6		
Purpose of Disbursement: check printing			Transaction ID: D11728H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.56		152.63		193.19

<b>C. Full Name (Last, First, Middle Initial)</b> Item Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5509 Vine Street			Allocated Activity or Event Year-To-Date 948060.86		
City Alexandria	State VA	Zip Code 22310	Date M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6		
Purpose of Disbursement: copier			Transaction ID: D11607H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
439.42		1653.08		2092.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
493.37		1856.10		2349.47

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Pamela Johnson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 6082			Allocated Activity or Event Year-To-Date 948060.86		
City Annapolis	State MD	Zip Code 21401	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12022H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
130.39		490.52		620.91

<b>B. Full Name (Last, First, Middle Initial)</b> Thurman Jones, Jr			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 407 71st Avenue			Allocated Activity or Event Year-To-Date 948060.86		
City Seat Pleasant	State MD	Zip Code 20745	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12057H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
243.02		914.23		1157.25

<b>C. Full Name (Last, First, Middle Initial)</b> William Kottmeyer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12723 Karanargh Lane			Allocated Activity or Event Year-To-Date 948060.86		
City Bowie	State MD	Zip Code 20715	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: political consultant			Transaction ID: D11685H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.32		230.68		292.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
434.73		1635.43		2070.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A. Full Name (Last, First, Middle Initial)**  
Jordan Landry  
**Mailing Address**  
28 Rankin Street  
**City** Springvale **State** ME **Zip Code** 21365  
**Purpose of Disbursement:**  
payroll under 25% FEA  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
948060.86  
**Date** 10 / 13 / 2006  
**Transaction ID:** D12058H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.46		652.54		826.00

**B. Full Name (Last, First, Middle Initial)**  
Sue Levitan  
**Mailing Address**  
2650 Worrell Court  
**City** Crofton **State** MD **Zip Code** 21114  
**Purpose of Disbursement:**  
parking see memo entry  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
948060.86  
**Date** 10 / 13 / 2006  
**Transaction ID:** D11631H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.30		12.45		15.75

**C. Full Name (Last, First, Middle Initial)**  
Lexis-Nexis  
**Mailing Address**  
1150 Eighteenth Street, NW, Suite  
**City** Washington **State** DC **Zip Code** 20036  
**Purpose of Disbursement:**  
research service  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
948060.86  
**Date** 10 / 13 / 2006  
**Transaction ID:** D11673H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.79		157.21		199.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
218.55		822.20		1040.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Little Shop of Hardware			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3252 Keswick Road			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21211	Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: equipment			Transaction ID: D11723H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.03		90.42		114.45

<b>B. Full Name (Last, First, Middle Initial)</b> Ebony Lyons			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1530 Pentridge Rd # 409C			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21239	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11636H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.26		31.12		39.38

<b>C. Full Name (Last, First, Middle Initial)</b> Marlon Marshall			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8521 Greenbelt Road # 101			Allocated Activity or Event Year-To-Date 948060.86		
City Greenbelt	State MD	Zip Code 20770	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: political consultant			Transaction ID: D11697H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
242.29		911.54		1153.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Sarah Martin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1101 Club Village Drive # 210			Allocated Activity or Event Year-To-Date 948060.86		
City Columbia	State MO	Zip Code 65203	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11672H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.66		141.70		179.36

<b>B. Full Name (Last, First, Middle Initial)</b> Martin-Lauer Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7003 Dogwood Road			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21244	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: political consulting			Transaction ID: D11708H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1155.00		4345.00		5500.00

<b>C. Full Name (Last, First, Middle Initial)</b> John Mathias, Jr.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6402 White Oak Court			Allocated Activity or Event Year-To-Date 948060.86		
City Frederick	State MD	Zip Code 21701	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12023H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.20		580.13		734.33

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1346.86		5066.83		6413.69

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Rachel McMullin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 125 Northway			Allocated Activity or Event Year-To-Date 948060.86		
City Greenbelt	State MD	Zip Code 20770	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12024H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
190.25		715.74		905.99

<b>B. Full Name (Last, First, Middle Initial)</b> Robert Metz			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4827 Alton Place NW			Allocated Activity or Event Year-To-Date 948060.86		
City Washington	State DC	Zip Code 20016	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: cell phone see memo entry			Transaction ID: D11644H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>C. Full Name (Last, First, Middle Initial)</b> Robert Mook			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 610 Americana Drive # 102			Allocated Activity or Event Year-To-Date 948060.86		
City Annapolis	State MD	Zip Code 21403	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: mileage			Transaction ID: D11643H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.12		53.14		67.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.07		824.18		1043.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Robert Mook			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 610 Americana Drive # 102			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Category/ Type		
Annapolis	MD	21403			
Purpose of Disbursement: Hotel see memo entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Activity or Event Identifier: Administrative			Transaction ID: D11680H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.27		192.89		244.16

<b>B. Full Name (Last, First, Middle Initial)</b> Robert Mook			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 610 Americana Drive # 102			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Category/ Type		
Annapolis	MD	21403			
Purpose of Disbursement: Airfare see memo entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Activity or Event Identifier: Administrative			Transaction ID: D11691H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
137.59		517.61		655.20

<b>C. Full Name (Last, First, Middle Initial)</b> Gillian Mueller			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1520 O Street NW #301			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Category/ Type		
Washington	DC	20005			
Purpose of Disbursement: political consultant			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Activity or Event Identifier: Administrative			Transaction ID: D11703H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
241.36		908.00		1149.36

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Patrick Murray			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3114 E Baltimore Street			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Baltimore	MD	21224		
Purpose of Disbursement: payroll under 25% FEA			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D12025H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
403.37		1517.45		1920.82

<b>B. Full Name (Last, First, Middle Initial)</b> NGP			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5505 Connecticut Avenue NW, Suite			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Washington	DC	20015		
Purpose of Disbursement: software			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D11670H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

<b>C. Full Name (Last, First, Middle Initial)</b> Mustafa Nusraty			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 18463 Heritage Hills Drive			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Olney	MD	20832		
Purpose of Disbursement: payroll under 25% FEA			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D12059H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.15		617.55		781.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
599.02		2253.50		2852.52

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Neil Oleson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 400 North Charles Street			Allocated Activity or Event Year-To-Date 948060.86	
City Baltimore	State MD	Zip Code 21218	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: mileage			Transaction ID: D11666H4	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="27.03"/>		<input type="text" value="101.73"/>		<input type="text" value="128.76"/>

<b>B. Full Name (Last, First, Middle Initial)</b> Papa John's Pizza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 190 Main Street			Allocated Activity or Event Year-To-Date 948060.86	
City Annapolis	State MD	Zip Code 21401	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: food for staff meeting			Transaction ID: D11616H4	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.76"/>		<input type="text" value="29.23"/>		<input type="text" value="36.99"/>

<b>C. Full Name (Last, First, Middle Initial)</b> Park America			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 130 Gorman Avenue			Allocated Activity or Event Year-To-Date 948060.86	
City Annapolis	State MD	Zip Code 21401	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: parking see Sue Levitan			Transaction ID: D11632H4	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3.30"/>		<input type="text" value="12.45"/>		<input type="text" value="15.75"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="34.79"/>		<input type="text" value="130.96"/>		<input type="text" value="165.75"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Park America			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 130 Gorman Avenue			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Annapolis	MD	21401		
Purpose of Disbursement: parking see E Aloi			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D11663H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.35		31.45		39.80

<b>B. Full Name (Last, First, Middle Initial)</b> Matthew Patton			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8508 16th Street # 321			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Silver Spring	MD	20910		
Purpose of Disbursement: payroll under 25% FEA			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D12017H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
270.69		1018.34		1289.03

<b>C. Full Name (Last, First, Middle Initial)</b> Tyler Patton			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 17614 York Road			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Hagerstown	MD	21740		
Purpose of Disbursement: payroll under 25% FEA			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D12026H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
190.25		715.74		905.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
469.29		1765.53		2234.82

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> David R. Paulson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5115 Wetheredsville Road			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21229	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: reimburse see memo Entry			Transaction ID: D11668H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

<b>B. Full Name (Last, First, Middle Initial)</b> Paychex Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 700 Red Brooke Blvd Suite 200			Allocated Activity or Event Year-To-Date 948060.86		
City Owings Mills	State MD	Zip Code 21117	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: payroll services			Transaction ID: D11620H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.16		294.04		372.20

<b>C. Full Name (Last, First, Middle Initial)</b> Joshua J Phoebus			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2018 Meadow Drive			Allocated Activity or Event Year-To-Date 948060.86		
City Westminster	State MD	Zip Code 21158	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12018H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
271.02		1019.57		1290.59

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
380.68		1432.11		1812.79

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Pizza Hut			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7009 Martin Luther King Jr Hwy			Allocated Activity or Event Year-To-Date 948060.86		
City Landover	State MD	Zip Code 20785	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: staff meeting food			Transaction ID: D11617H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.84		59.63		75.47

<b>B. Full Name (Last, First, Middle Initial)</b> Pizza Taco Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 626 Admiral Drive #14			Allocated Activity or Event Year-To-Date 948060.86		
City Annapolis	State MD	Zip Code 21401	Date <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Food for meeting			Transaction ID: D11598H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.31		65.12		82.43

<b>C. Full Name (Last, First, Middle Initial)</b> Nate Pretl			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6005 Clearspring Road			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21212	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11641H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.42		50.52		63.94

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.57		175.27		221.84

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Quantumlink			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 22108			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Tulsa	OK	74121			
Purpose of Disbursement: long distance			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: D11687H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
93.30		351.03		444.33

<b>B. Full Name (Last, First, Middle Initial)</b> Radio and TV Monitoring			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3404 Wisconsin Avenue NW			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2006"/>		
Washington	DC	20016			
Purpose of Disbursement: equipment see David Paulson			Category/Type		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D11669H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

<b>C. Full Name (Last, First, Middle Initial)</b> Radisson Hotel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5700 Falls Road			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2006"/>		
Baltimore	MD	21210			
Purpose of Disbursement: meeting venue			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: D11618H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
156.22		587.72		743.94

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
249.52		938.75		1188.27

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Red Maple Properties			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1192			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> D11600H4		
Eldersburg	MD	21784			
Purpose of Disbursement: rent			Category/ Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
323.40		1216.60		1540.00

<b>B. Full Name (Last, First, Middle Initial)</b> Kenneth Reichard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 137 Monument Street			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> D11717H4		
Rockville	MD	20850			
Purpose of Disbursement: venue rental see memo entry			Category/ Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.45		389.17		423.50

<b>C. Full Name (Last, First, Middle Initial)</b> Aurora Dare Rivendale			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1095 Broadview Drive			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> D11978H4		
Annapolis	MD	21401			
Purpose of Disbursement: payroll under 25% FEA			Category/ Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.95		86.37		109.32

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
449.80		1692.14		2141.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Brian Rogers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7906 Roxbury Court			Allocated Activity or Event Year-To-Date 948060.86		
City Hyattsville	State MD	Zip Code 20785	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11660H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.78		78.20		98.98

<b>B. Full Name (Last, First, Middle Initial)</b> Brian Rogers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7906 Roxbury Court			Allocated Activity or Event Year-To-Date 948060.86		
City Hyattsville	State MD	Zip Code 20785	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11630H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.04		7.70		9.74

<b>C. Full Name (Last, First, Middle Initial)</b> Roosevelt Information			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1833 New Hampshire Ave			Allocated Activity or Event Year-To-Date 948060.86		
City Washington	State DC	Zip Code 20009	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: research service			Transaction ID: D11682H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.39		204.61		259.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.21		290.51		367.72

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Joshua Russin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2172 Ambleside Court			Allocated Activity or Event Year-To-Date 948060.86		
City Frederick	State MD	Zip Code 21702	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12027H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
106.70		401.40		508.10

<b>B. Full Name (Last, First, Middle Initial)</b> Santora LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 166 E 35th Street 14 H			Allocated Activity or Event Year-To-Date 948060.86		
City New York	State NY	Zip Code 10016	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: political consultant			Transaction ID: D11705H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Jennifer Sconyers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8108 Greenwood Avenue #5			Allocated Activity or Event Year-To-Date 948060.86		
City Takoma Park	State MD	Zip Code 20912	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: mileage			Transaction ID: D11640H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.92		44.88		56.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
748.62		2816.28		3564.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Melanie Share			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6405 Misty Top Pass			Allocated Activity or Event Year-To-Date 948060.86		
City Columbia	State MD	Zip Code 21044	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12060H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
169.12		636.25		805.37

<b>B. Full Name (Last, First, Middle Initial)</b> Jahantab Siddiqui			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8230 Lincoln Drive			Allocated Activity or Event Year-To-Date 948060.86		
City Jessup	State MD	Zip Code 20794	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D12028H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
194.59		732.03		926.62

<b>C. Full Name (Last, First, Middle Initial)</b> Smart Computing Solutions, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 201 Ridge Avenue			Allocated Activity or Event Year-To-Date 948060.86		
City Annapolis	State MD	Zip Code 21401	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: computer service			Transaction ID: D11688H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.21		377.02		477.23

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
463.92		1745.30		2209.22

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Adia Smith			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6163 Wooster Avenue			Allocated Activity or Event Year-To-Date 948060.86		
City Los Angeles	State CA	Zip Code 90056	Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6		
Purpose of Disbursement: cell phone see memo entry			Transaction ID: D11719H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>B. Full Name (Last, First, Middle Initial)</b> Nina Smith			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6911 Lyle Street			Allocated Activity or Event Year-To-Date 948060.86		
City Lanham	State MD	Zip Code 20706	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: mileage			Transaction ID: D11664H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.99		82.73		104.72

<b>C. Full Name (Last, First, Middle Initial)</b> Nina Smith			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6911 Lyle Street			Allocated Activity or Event Year-To-Date 948060.86		
City Lanham	State MD	Zip Code 20706	Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6		
Purpose of Disbursement: payroll under 25% FEA			Transaction ID: D11979H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
193.89		729.43		923.32

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
230.58		867.46		1098.04

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Nina Smith			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6911 Lyle Street			Allocated Activity or Event Year-To-Date 948060.86		
City Lanham	State MD	Zip Code 20706	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: mileage			Transaction ID: D11716H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.99		67.68		85.67

<b>B. Full Name (Last, First, Middle Initial)</b> Southwest Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 36647   2702 Love Field Drive			Allocated Activity or Event Year-To-Date 948060.86		
City Dallas	State TX	Zip Code 75235	Date <input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Airfare reimburse			Transaction ID: D11692H4		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
137.59		517.61		655.20

<b>C. Full Name (Last, First, Middle Initial)</b> Sprint Nextel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7977			Allocated Activity or Event Year-To-Date 948060.86		
City Shawnee Mission	State KS	Zip Code 66207	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: cell phone see Trisch Gaines			Transaction ID: D11649H4		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.99		67.68		85.67

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Sprint Nextel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7977			Allocated Activity or Event Year-To-Date 948060.86		
City Shawnee Mission	State KS	Zip Code 66207	Date MM / DD / YYYY 10 / 16 / 2006		
Purpose of Disbursement: cell phone Adia Smith			Transaction ID: D11720H4		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>B. Full Name (Last, First, Middle Initial)</b> Sprint Nextel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7977			Allocated Activity or Event Year-To-Date 948060.86		
City Shawnee Mission	State KS	Zip Code 66207	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: cell phone see Robert Metz			Transaction ID: D11645H4		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>C. Full Name (Last, First, Middle Initial)</b> Square One Assoc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 101422			Allocated Activity or Event Year-To-Date 948060.86		
City Arlington	State VA	Zip Code 22210	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: political consulting			Transaction ID: D11707H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Squier Knapp Dunn			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1818 N Street NW # 450			Allocated Activity or Event Year-To-Date 948060.86		
City Washington	State DC	Zip Code 20036	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: political consulting			Transaction ID: D11706H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

<b>B. Full Name (Last, First, Middle Initial)</b> Lakshmi Sridaran			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7310 Maple Avenue			Allocated Activity or Event Year-To-Date 948060.86		
City Takoma Park	State MD	Zip Code 20912	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: Mileage			Transaction ID: D11678H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.56		472.36		597.92

<b>C. Full Name (Last, First, Middle Initial)</b> Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9020			Allocated Activity or Event Year-To-Date 948060.86		
City Des Moines	State IA	Zip Code 50368	Date MM / DD / YYYY 10 / 12 / 2006		
Purpose of Disbursement: office supplies			Transaction ID: D11624H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
779.46		2932.30		3711.76

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1535.02		5774.66		7309.68

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Staples Mailing Address 2631 Housley Road City State Zip Code Annapolis MD 21401 Purpose of Disbursement: supplies see James Walsh Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 948060.86 Date MM / DD / YYYY 10 / 13 / 2006 <b>Transaction ID:</b> D11677H4
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.70		186.99		236.69

<b>B. Full Name (Last, First, Middle Initial)</b> Streamload Mailing Address 525 B Street # 1000 City State Zip Code San Diego CA 92101 Purpose of Disbursement: online Storage Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 948060.86 Date MM / DD / YYYY 10 / 05 / 2006 <b>Transaction ID:</b> D11608H4
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.08		7.87		9.95

<b>C. Full Name (Last, First, Middle Initial)</b> SVM LP Mailing Address 999 Etouhy Ave #250 City State Zip Code Des Plaines IL 60018 Purpose of Disbursement: gas Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 948060.86 Date MM / DD / YYYY 10 / 11 / 2006 <b>Transaction ID:</b> D11622H4
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
407.57		1533.27		1940.84

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
409.65		1541.14		1950.79

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Teltek System			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 236 East Main Street			Allocated Activity or Event Year-To-Date 948060.86		
City Westminster	State MD	Zip Code 21157	Date MM / DD / YYYY 10 / 18 / 2006		
Purpose of Disbursement: phone system equipement			Transaction ID: D11727H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.91		451.09		571.00

<b>B. Full Name (Last, First, Middle Initial)</b> The Wills Duncan Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 99161			Allocated Activity or Event Year-To-Date 948060.86		
City Raleigh	State NC	Zip Code 27624	Date MM / DD / YYYY 10 / 03 / 2006		
Purpose of Disbursement: political consultant			Transaction ID: D11603H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Unishippers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1123			Allocated Activity or Event Year-To-Date 948060.86		
City Fort Meade	State MD	Zip Code 20735	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: shipping			Transaction ID: D11633H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.06		15.29		19.35

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1173.97		4416.38		5590.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> US Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 Church Circle			Allocated Activity or Event Year-To-Date 948060.86		
City Annapolis	State MD	Zip Code 21401	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: postage see E Aloï			Transaction ID: D11690H4		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.90		308.10		390.00

<b>B. Full Name (Last, First, Middle Initial)</b> Varoga & Rice			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1624 Franklin Street #901			Allocated Activity or Event Year-To-Date 948060.86		
City Oakland	State CA	Zip Code 94612	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: political consulting			Transaction ID: D11709H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2566.27		9654.11		12220.38

<b>C. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 64268			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21264	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: cell phone see James Walsh			Transaction ID: D11647H4		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2566.27		9654.11		12220.38

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 64268			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> D11653H4	
Baltimore	MD	21264		
Purpose of Disbursement: cell phone see E Aloi			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>B. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 64268			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> D11722H4	
Baltimore	MD	21264		
Purpose of Disbursement: cell phone see Douglas Hole			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

<b>C. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 64268			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> D11714H4	
Baltimore	MD	21264		
Purpose of Disbursement: cell phone			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
94.60		355.88		450.48

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
94.60		355.88		450.48

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 64268			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21264	Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: cell phone			Transaction ID: D11726H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.31		324.71		411.02

<b>B. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 64268			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21264	Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: cell phone			Transaction ID: D11725H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.66		134.17		169.83

<b>C. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 64268			Allocated Activity or Event Year-To-Date 948060.86		
City Baltimore	State MD	Zip Code 21264	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: cell see E Aloï			Transaction ID: D11662H4		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.52		47.11		59.63

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.97		458.88		580.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Verizon			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 17577			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Baltimore	MD	21297		
Purpose of Disbursement: phones			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 8 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D11724H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
151.76		570.92		722.68

<b>B. Full Name (Last, First, Middle Initial)</b> Verizon			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 17577			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Baltimore	MD	21297		
Purpose of Disbursement: telephone			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D11710H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.71		649.74		822.45

<b>C. Full Name (Last, First, Middle Initial)</b> Verizon			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 17577			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Category/ Type	
Baltimore	MD	21297		
Purpose of Disbursement: Telephones			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D11699H4	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
378.62		1424.36		1802.98

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
703.09		2645.02		3348.11

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 17577			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Baltimore	MD	21297	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: phones			Transaction ID: D11671H4		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.10		135.84		171.94

<b>B. Full Name (Last, First, Middle Initial)</b> Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 17577			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Baltimore	MD	21297	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: phone			Transaction ID: D11665H4		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.04		94.21		119.25

<b>C. Full Name (Last, First, Middle Initial)</b> James Edward Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1711 Mass Avenue NW #130			Allocated Activity or Event Year-To-Date 948060.86		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Washington	DC	20036	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: cell see memo entry			Transaction ID: D11646H4		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.30		70.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.84		285.35		361.19

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> James Edward Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1711 Mass Avenue NW #130			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> D11675H4	
Washington	DC	20036		
Purpose of Disbursement: Travel			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.81		134.76		170.57

<b>B. Full Name (Last, First, Middle Initial)</b> James Edward Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1711 Mass Avenue NW #130			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> D11676H4	
Washington	DC	20036		
Purpose of Disbursement: reimburse supplies see memo entry			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.70		186.99		236.69

<b>C. Full Name (Last, First, Middle Initial)</b> James Edward Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1711 Mass Avenue NW #130			Allocated Activity or Event Year-To-Date 948060.86	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> D11667H4	
Washington	DC	20036		
Purpose of Disbursement: mileage			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.82		108.45		137.27

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.33		430.20		544.53

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Julius West			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6104 Bur Trail			Allocated Activity or Event Year-To-Date 948060.86		
City Raleigh	State NC	Zip Code 27616	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: mileage			Transaction ID: D11642H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.76		51.78		65.54

<b>B. Full Name (Last, First, Middle Initial)</b> Curtis Young			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 512 W 151 St #4D			Allocated Activity or Event Year-To-Date 948060.86		
City New York	State NY	Zip Code 10031	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: Travel			Transaction ID: D11655H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.64		66.36		84.00

<b>C. Full Name (Last, First, Middle Initial)</b> Curtis Young			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 512 W 151 St #4D			Allocated Activity or Event Year-To-Date 948060.86		
City New York	State NY	Zip Code 10031	Date MM / DD / YYYY 10 / 13 / 2006		
Purpose of Disbursement: political consultant			Transaction ID: D11701H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
472.50		1777.50		2250.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
503.90		1895.64		2399.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
36119.09		135879.03		171998.12