

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

OFFICE OF THE SECRETARY OF THE SENATE

07 NOV -2 PM 12:39

Office Use Only

1. NAME OF COMMITTEE (in full) Friends Of Hillary

USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines

ADDRESS (number and street) 1133 Connecticut Avenue, NW Suite 300 Washington DC 20036

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00358895 3. IS THIS REPORT NEW (N) OR AMENDED (A) NY 0

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 01 01 2007 through 03 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Shelly R. Moskwa

Signature of Treasurer Date 10 30 2007

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

Table with 10 columns and 1 row, labeled 'Office Use Only' in the first column.

FEC FORM 3 (Revised 02/2003)

27020390215

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 / 147	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Hillary

A. Full Name (Last, First, Middle Initial) Hudson Media Partners, LLC		Transaction ID: D19593 Date of Disbursement 03 / 30 / 2007	
Mailing Address 3299 K Street, N.W., Suite 500		Amount of Each Disbursement this Period 36195.87	
City Washington	State DC	Zip Code 20007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Consulting/Political Strategy	001 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) ▼		

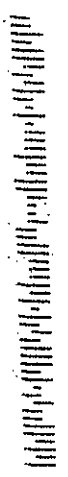
B. Full Name (Last, First, Middle Initial) Heather Hurlburt		Transaction ID: D19659 Date of Disbursement 01 / 31 / 2007	
Mailing Address 516 West Washington		Amount of Each Disbursement this Period 937.50	
City Ann Arbor	State MI	Zip Code 48103	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Consulting/Communications	001 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) ▼		

C. Full Name (Last, First, Middle Initial) Heather Hurlburt		Transaction ID: D19660 Date of Disbursement 02 / 05 / 2007	
Mailing Address 516 West Washington		Amount of Each Disbursement this Period 756.05	
City Ann Arbor	State MI	Zip Code 48103	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Consulting/Communications	001 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) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	37889.42
TOTAL This Period (last page this line number only)	▶	

27020390216

Friends
1133 Connecticut Ave NW
Suite 300
Washington DC 20036



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD A DOTTED LINE
CERTIFIED MAIL™



7007 0220 0002 5051 7151



0000



22301

U.S. POSTAGE
PAID
FELLSVILLE, VA
OCT 31 2007
PMOUNT
\$5.60
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RETURN RECEIPT
REQUESTED

Office of Public Records
PO Box 5109
Alexandria VA 22301

RECEIVED
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BY THE SENATE
POST OFFICE

71706502072

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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Postmark

USPS REGISTERED/CERTIFIED _____

10/31/07

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

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OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

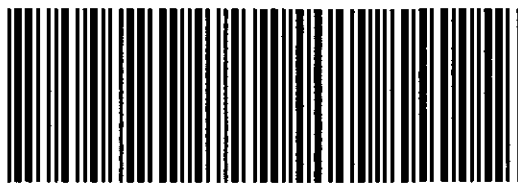
PREPARER

TKM

DATE PREPARED

11/2/07

81206390218



27020390219