

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 National Academy of Elder Law Attorneys Senior Rights Political Action Committee

ADDRESS (number and street) 1577 Spring Hill Road, Suite 220 Check if different than previously reported. (ACC) Vienna VA 22182

2. FEC IDENTIFICATION NUMBER C00393553 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Report for the: Post-Election, General, Runoff, Special

5. Covering Period 04 01 2006 through 06 30 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 Mr. Hugh K Webster Signature of Treasurer Electronically Filed by Mr. Hugh K Webster Date 03 23 2009

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

Table with 10 columns and 1 row. Office Use Only box on the left, FEC FORM 3X (Rev. 12/2004) on the right.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

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		58661.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	66469.00									
(c) Total Receipts (from Line 19)	46632.00	61940.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	113101.00	120601.00								
7. Total Disbursements (from Line 31)	5500.00	13000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	107601.00	107601.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

National Academy of Elder Law Attorneys Senior Rights Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

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	36017.00	49735.00
(i) Itemized (use Schedule A)	10615.00	12205.00
(ii) Unitemized	46632.00	61940.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	46632.00	61940.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	46632.00	61940.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	46632.00	61940.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	13000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5500.00	13000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5500.00	13000.00

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	46632.00	61940.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46632.00	61940.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Betsy M Angevine	Date of Receipt MM / DD / YYYY 04 / 19 / 2006
	Mailing Address 13215 E. Penn Street Suite 205	Transaction ID: SA11AI.4746
	City Whittier State CA Zip Code 90602	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Miller & Angevine Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Terry Abrams Berger	Date of Receipt MM / DD / YYYY 04 / 06 / 2006
	Mailing Address 1550 NE Miami Gardens Dr. Suite 507	Transaction ID: SA11AI.4783
	City N. Miami Beach State FL Zip Code 33179	Amount of Each Receipt this Period 417.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Abrams Berger, PA Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 834.00	

C.	Full Name (Last, First, Middle Initial) Terry Abrams Berger	Date of Receipt MM / DD / YYYY 05 / 11 / 2006
	Mailing Address 1550 NE Miami Gardens Dr. Suite 507	Transaction ID: SA11AI.4808
	City N. Miami Beach State FL Zip Code 33179	Amount of Each Receipt this Period 417.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Abrams Berger, PA Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1251.00	

SUBTOTAL of Receipts This Page (optional)	5834.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Terry Abrams Berger		Date of Receipt MM / DD / YYYY 06 / 16 / 2006		
	Mailing Address 1550 NE Miami Gardens Dr. Suite 507		Transaction ID: SA11AI.4810		
	City N. Miami Beach	State FL	Zip Code 33179	Amount of Each Receipt this Period 417.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Abrams Berger, PA	Occupation Attorney	Aggregate Year-to-Date 1668.00		

B.	Full Name (Last, First, Middle Initial) Fay Blix		Date of Receipt MM / DD / YYYY 04 / 06 / 2006		
	Mailing Address 23601 Moulton Pkwy., Ste. 220		Transaction ID: SA11AI.4762		
	City Laguna Hills	State CA	Zip Code 92653	Amount of Each Receipt this Period 417.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Elder Law Center	Occupation Attorney	Aggregate Year-to-Date 834.00		

C.	Full Name (Last, First, Middle Initial) Fay Blix		Date of Receipt MM / DD / YYYY 05 / 11 / 2006		
	Mailing Address 23601 Moulton Pkwy., Ste. 220		Transaction ID: SA11AI.4794		
	City Laguna Hills	State CA	Zip Code 92653	Amount of Each Receipt this Period 417.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Elder Law Center	Occupation Attorney	Aggregate Year-to-Date 1251.00		

SUBTOTAL of Receipts This Page (optional)	1251.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Fay Blix		Date of Receipt	
	Mailing Address 23601 Moulton Pkwy., Ste. 220		M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 6	
	City	State	Zip Code	Transaction ID: SA11AI.6012
	Laguna Hills	CA	92653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		75.00	
Name of Employer Elder Law Center		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1326.00		

B.	Full Name (Last, First, Middle Initial) Fay Blix		Date of Receipt	
	Mailing Address 23601 Moulton Pkwy., Ste. 220		M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
	City	State	Zip Code	Transaction ID: SA11AI.4811
	Laguna Hills	CA	92653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		417.00	
Name of Employer Elder Law Center		Occupation Attorney		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1743.00		

C.	Full Name (Last, First, Middle Initial) Mr. William J Browning		Date of Receipt	
	Mailing Address 8101 N. High Street Suite 370		M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
	City	State	Zip Code	Transaction ID: SA11AI.4757
	Columbus	OH	43235	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Browning & Meyer Co., LPA		Occupation Attorney		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1492.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. William J Browning	Date of Receipt MM / DD / YYYY 05 / 11 / 2006
	Mailing Address 8101 N. High Street Suite 370	Transaction ID: SA11AI.4793
	City Columbus State OH Zip Code 43235	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Browning & Meyer Co., LPA Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 3000.00	

B.	Full Name (Last, First, Middle Initial) Mr. William J Browning	Date of Receipt MM / DD / YYYY 05 / 21 / 2006
	Mailing Address 8101 N. High Street Suite 370	Transaction ID: SA11AI.5910
	City Columbus State OH Zip Code 43235	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Browning & Meyer Co., LPA Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 3075.00	

C.	Full Name (Last, First, Middle Initial) Mr. William J Browning	Date of Receipt MM / DD / YYYY 06 / 16 / 2006
	Mailing Address 8101 N. High Street Suite 370	Transaction ID: SA11AI.4812
	City Columbus State OH Zip Code 43235	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Browning & Meyer Co., LPA Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 4075.00	

SUBTOTAL of Receipts This Page (optional)	2075.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Ann N Butenhof	Date of Receipt MM / DD / YYYY 04 / 19 / 2006
	Mailing Address 132 Middle Street	Transaction ID: SA11AI.4753
	City State Zip Code Manchester NH 03101	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Self Employed	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) Carol A. Coakley	Date of Receipt MM / DD / YYYY 05 / 21 / 2006
	Mailing Address PO Box 971	Transaction ID: SA11AI.5916
	City State Zip Code Bar Harbor ME 04609	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Law Office of Carol A. Coakley	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Mr. Tim P Crawford	Date of Receipt MM / DD / YYYY 05 / 21 / 2006
	Mailing Address 840 Lake Avenue Suite 60	Transaction ID: SA11AI.5918
	City State Zip Code Racine WI 53403	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Tim P. Crawford, SC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	625.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 29

(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)

National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Lawrence E Davidow

Mailing Address 1 Suffolk Square
Suite 330

City State Zip Code
Islandia NY 11749

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

Name of Employer
Davidow, Davidow, Siegal & Ste

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
04 / 20 / 2006

Transaction ID: SA11AI.4747

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Lawrence E Davidow

Mailing Address 1 Suffolk Square
Suite 330

City State Zip Code
Islandia NY 11749

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

Name of Employer
Davidow, Davidow, Siegal & Ste

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 21 / 2006

Transaction ID: SA11AI.5922

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

Susan L. Goldring

Mailing Address 268 Broad Street, PO Box 489

City State Zip Code
Red Bank NJ 07701

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

Name of Employer
Goldring, Edwards & Dalton

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 21 / 2006

Transaction ID: SA11AI.5943

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Richard D. Hall, Jr.		Date of Receipt		
	Mailing Address 221 Commerce Pl. Ste. A		M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 6		
	City Greensboro	State NC	Zip Code 27401	Transaction ID: SA11AI.5947	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00		
	Name of Employer Tax, Estate & Elder Planning C		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00			

B.	Full Name (Last, First, Middle Initial) Doris E. Hawks, Esq.		Date of Receipt		
	Mailing Address 851 Fremont Avenue Suite 102		M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6		
	City Los Altos	State CA	Zip Code 94024	Transaction ID: SA11AI.4784	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00		
	Name of Employer Law Office of Doris E. Hawks		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00			

C.	Full Name (Last, First, Middle Initial) Frank A. Johns, CELA		Date of Receipt		
	Mailing Address PO Box 3585		M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 6		
	City Greensboro	State NC	Zip Code 27402	Transaction ID: SA11AI.4758	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00		
	Name of Employer Booth, Harrington & Johns		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional)	▶	3375.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.

Full Name (Last, First, Middle Initial) Frank A. Johns, CELA		Date of Receipt MM / DD / YYYY 05 / 21 / 2006
Mailing Address PO Box 3585		Transaction ID: SA11AI.5955
City Greensboro	State NC	Zip Code 27402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Booth, Harrington & Johns	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

B.

Full Name (Last, First, Middle Initial) Dale M. Krause, Esq.		Date of Receipt MM / DD / YYYY 05 / 04 / 2006
Mailing Address 1120 Red Wing Trail		Transaction ID: SA11AI.4803
City De Pere	State WI	Zip Code 54115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Krause Financial Services	Occupation Attorney	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.

Full Name (Last, First, Middle Initial) Laura M. Krohn		Date of Receipt MM / DD / YYYY 05 / 21 / 2006
Mailing Address 670 Main St.		Transaction ID: SA11AI.5958
City East Greenwich	State RI	Zip Code 02818
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer Law Office of Laura Krohn	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	▶	5375.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Rick L. Law, Esq.	Date of Receipt MM / DD / YYYY 06 / 12 / 2006
	Mailing Address 2775 Church Road	Transaction ID: SA11AI.4815
	City State Zip Code Aurora IL 60502	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Law ElderLaw, LLP Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Catherine Leas	Date of Receipt MM / DD / YYYY 04 / 06 / 2006
	Mailing Address 10451 Palmeri Drive	Transaction ID: SA11AI.4756
	City State Zip Code Sun City AZ 85373	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Attorney at Law Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Catherine Leas	Date of Receipt MM / DD / YYYY 05 / 11 / 2006
	Mailing Address 10451 Palmeri Drive	Transaction ID: SA11AI.4789
	City State Zip Code Sun City AZ 85373	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Attorney at Law Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	5400.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A. Full Name (Last, First, Middle Initial)
Catherine Leas
 Mailing Address 10451 Palmeri Drive
 City State Zip Code
 Sun City AZ 85373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Attorney at Law Attorney
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 6 / 2 0 0 6
Transaction ID: SA11AI.4813
 Amount of Each Receipt this Period
 200.00
 Contribution

B. Full Name (Last, First, Middle Initial)
B. Bailey Liipfert
 Mailing Address 110 Oakwood Drive
 Suite 300
 City State Zip Code
 Winston-Salem NC 27103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Craige, Brawley, Liipfert & Wa Attorney
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 1 / 2 0 0 6
Transaction ID: SA11AI.4795
 Amount of Each Receipt this Period
 100.00
 Contribution

C. Full Name (Last, First, Middle Initial)
B. Bailey Liipfert
 Mailing Address 110 Oakwood Drive
 Suite 300
 City State Zip Code
 Winston-Salem NC 27103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Craige, Brawley, Liipfert & Wa Attorney
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 6 / 2 0 0 6
Transaction ID: SA11AI.4814
 Amount of Each Receipt this Period
 100.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 400.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Harry S. Margolis, Esq.		Date of Receipt MM / DD / YYYY 05 / 04 / 2006		
	Mailing Address 535 Boylston St., 8th Fl.		Transaction ID: SA11AI.4790		
	City Boston	State MA	Zip Code 02116	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Margolis & Associates	Occupation Attorney	Aggregate Year-to-Date 500.00		

B.	Full Name (Last, First, Middle Initial) Mr. Rajiv Nagaich		Date of Receipt MM / DD / YYYY 05 / 04 / 2006		
	Mailing Address 31919 6th Avenue S. Suite A-100		Transaction ID: SA11AI.4809		
	City Federal Way	State WA	Zip Code 98003	Amount of Each Receipt this Period 417.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Law Offices of Johnson & Nagai	Occupation Attorney	Aggregate Year-to-Date 834.00		

C.	Full Name (Last, First, Middle Initial) Mr. Rajiv Nagaich		Date of Receipt MM / DD / YYYY 06 / 16 / 2006		
	Mailing Address 31919 6th Avenue S. Suite A-100		Transaction ID: SA11AI.4817		
	City Federal Way	State WA	Zip Code 98003	Amount of Each Receipt this Period 417.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Law Offices of Johnson & Nagai	Occupation Attorney	Aggregate Year-to-Date 1251.00		

SUBTOTAL of Receipts This Page (optional)	▶	1334.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 17 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A. Full Name (Last, First, Middle Initial)
Tim Nay, Esq.
Mailing Address 6500 SW Macadam Ave., Ste. 300
City Portland State OR Zip Code 97239
FEC ID number of contributing federal political committee. **C**
Name of Employer Law Offices of Nay & Friedenbe
Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 04 / 20 / 2006
Transaction ID: SA11AI.4760
Amount of Each Receipt this Period 1000.00
Contribution

B. Full Name (Last, First, Middle Initial)
Tim Nay, Esq.
Mailing Address 6500 SW Macadam Ave., Ste. 300
City Portland State OR Zip Code 97239
FEC ID number of contributing federal political committee. **C**
Name of Employer Law Offices of Nay & Friedenbe
Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1150.00
Date of Receipt 05 / 21 / 2006
Transaction ID: SA11AI.5966
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
John B. Payne, Esq.
Mailing Address 1800 Grindley Park Street Suite 6
City Deaborn State MI Zip Code 48124
FEC ID number of contributing federal political committee. **C**
Name of Employer Garrison Law House, PC
Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00
Date of Receipt 05 / 11 / 2006
Transaction ID: SA11AI.4796
Amount of Each Receipt this Period 90.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 1240.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 29
(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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.

Full Name (Last, First, Middle Initial) John B. Payne, Esq.		Date of Receipt MM / DD / YYYY 05 / 21 / 2006
Mailing Address 1800 Grindley Park Street Suite 6		Transaction ID: SA11AI.5978
City Deaborn	State MI	Zip Code 48124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Garrison Law House, PC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

B.

Full Name (Last, First, Middle Initial) John B. Payne, Esq.		Date of Receipt MM / DD / YYYY 06 / 16 / 2006
Mailing Address 1800 Grindley Park Street Suite 6		Transaction ID: SA11AI.4818
City Deaborn	State MI	Zip Code 48124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
Name of Employer Garrison Law House, PC	Occupation Attorney	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

C.

Full Name (Last, First, Middle Initial) Ms. Kerry R Peck		Date of Receipt MM / DD / YYYY 05 / 21 / 2006
Mailing Address 05 W Adams Street 31st Floor		Transaction ID: SA11AI.5979
City Chicago	State IL	Zip Code 60603
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer Peck, Bloom, Austriaco & Mitch	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	▶	690.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Dana B. Perry, CELA		Date of Receipt	
	Mailing Address 1000 Tallan Bldg.,		M M / D D / Y Y Y Y 04 / 23 / 2006	
	City	State	Zip Code	Transaction ID: SA11AI.4776
	Chatanooga	TN	37402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Chambliss, Bahner & Stophel, P		Occupation Attorney		Contribution
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) Dana B. Perry, CELA		Date of Receipt	
	Mailing Address 1000 Tallan Bldg.,		M M / D D / Y Y Y Y 05 / 21 / 2006	
	City	State	Zip Code	Transaction ID: SA11AI.5984
	Chatanooga	TN	37402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		75.00	
Name of Employer Chambliss, Bahner & Stophel, P		Occupation Attorney		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		

C.	Full Name (Last, First, Middle Initial) Ms. Margaret Madison Phelan		Date of Receipt	
	Mailing Address 508 E. Mcloughlin Blvd.		M M / D D / Y Y Y Y 04 / 06 / 2006	
	City	State	Zip Code	Transaction ID: SA11AI.4752
	Vancouver	WA	98663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		417.00	
Name of Employer Margaret Madison Phelan, PS		Occupation Attorney		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 834.00		

SUBTOTAL of Receipts This Page (optional)	▶	742.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 29
(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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Margaret Madison Phelan

Mailing Address 508 E. Mcloughlin Blvd.

City Vancouver State WA Zip Code 98663

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

Name of Employer Margaret Madison Phelan, PS Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1251.00

Date of Receipt MM / DD / YYYY 05 / 11 / 2006

Transaction ID: SA11AI.4788

Amount of Each Receipt this Period 417.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Margaret Madison Phelan

Mailing Address 508 E. Mcloughlin Blvd.

City Vancouver State WA Zip Code 98663

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

Name of Employer Margaret Madison Phelan, PS Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1668.00

Date of Receipt MM / DD / YYYY 06 / 16 / 2006

Transaction ID: SA11AI.4819

Amount of Each Receipt this Period 417.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Rene H Reixach

Mailing Address 2 State Street, 700 Crossroads Bld

City Rochester State NY Zip Code 14614

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

Name of Employer Woods, Oviatt, & Gilman LLP Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY 05 / 04 / 2006

Transaction ID: SA11AI.4792

Amount of Each Receipt this Period 250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1084.00**

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Rene H Reixach

Mailing Address 2 State Street, 700 Crossroads Bld

City State Zip Code
Rochester NY 14614

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

Name of Employer: Woods, Oviatt, & Gilman LLP
Occupation: Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 05 / 21 / 2006
Transaction ID: SA11AI.5988
Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
Jack Michael Rosenkranz, Esq.

Mailing Address PO Box1999

City State Zip Code
Tampa FL 33601

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

Name of Employer: Rosenkranz & Gilhool
Occupation: Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 11 / 2006
Transaction ID: SA11AI.4797
Amount of Each Receipt this Period: 100.00
Contribution

C. Full Name (Last, First, Middle Initial)
Jack Michael Rosenkranz, Esq.

Mailing Address PO Box1999

City State Zip Code
Tampa FL 33601

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

Name of Employer: Rosenkranz & Gilhool
Occupation: Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 05 / 21 / 2006
Transaction ID: SA11AI.5993
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jack Michael Rosenkranz, Esq.		Date of Receipt
	Mailing Address PO Box1999		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Tampa	FL	33601
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4820
Name of Employer Rosenkranz & Gillhool		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 475.00	Contribution

B.	Full Name (Last, First, Middle Initial) Kemp C. Scales		Date of Receipt
	Mailing Address PO Box 346		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Titusville	PA	16354
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4766
Name of Employer Elder Law Office of Kemp Scale		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 400.00	Contribution

C.	Full Name (Last, First, Middle Initial) Kemp C. Scales		Date of Receipt
	Mailing Address PO Box 346		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Titusville	PA	16354
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4798
Name of Employer Elder Law Office of Kemp Scale		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 600.00	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 23 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kemp C. Scales

Mailing Address PO Box 346

City Titusville State PA Zip Code 16354

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

Name of Employer Elder Law Office of Kemp Scale Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 06 / 16 / 2006
Transaction ID: SA11AI.4821
Amount of Each Receipt this Period 200.00
Contribution

B. Full Name (Last, First, Middle Initial)
Stephen J. Silverberg

Mailing Address 90 Merrick Avenue

City East Meadow State NY Zip Code 11554

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

Name of Employer Certilman Balin, et. al. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 06 / 2006
Transaction ID: SA11AI.4749
Amount of Each Receipt this Period 300.00
Contribution

C. Full Name (Last, First, Middle Initial)
Stephen J. Silverberg

Mailing Address 90 Merrick Avenue

City East Meadow State NY Zip Code 11554

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

Name of Employer Certilman Balin, et. al. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 11 / 2006
Transaction ID: SA11AI.4785
Amount of Each Receipt this Period 300.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 800.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stephen J. Silverberg

Mailing Address 90 Merrick Avenue

City State Zip Code
East Meadow NY 11554

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

Name of Employer Occupation
Certilman Balin, et. al. Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2006

Transaction ID: SA11AI.6007

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Stephen J. Silverberg

Mailing Address 90 Merrick Avenue

City State Zip Code
East Meadow NY 11554

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

Name of Employer Occupation
Certilman Balin, et. al. Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1275.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2006

Transaction ID: SA11AI.4822

Amount of Each Receipt this Period
300.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Reginald H Turnbull

Mailing Address 200 E. High Street

City State Zip Code
Jefferson City MO 65701

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

Name of Employer Occupation
Reaves Law Firm, PC Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2006

Transaction ID: SA11AI.4750

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **875.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 29
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Reginald H Turnbull	Date of Receipt
	Mailing Address 200 E. High Street	<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
	City State Zip Code Jefferson City MO 65701	Transaction ID: SA11AI.5996
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="75.00"/>
	Name of Employer Reaves Law Firm, PC Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="575.00"/>	

B.	Full Name (Last, First, Middle Initial) Ms. Mary E Wanderpolo	Date of Receipt
	Mailing Address 209 Cooper Avenue Suite 2	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
	City State Zip Code Montclair NJ 07043	Transaction ID: SA11AI.4780
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="200.00"/>
	Name of Employer Self Employed Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	Contribution

C.	Full Name (Last, First, Middle Initial) Ms. Mary E Wanderpolo	Date of Receipt
	Mailing Address 209 Cooper Avenue Suite 2	<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
	City State Zip Code Montclair NJ 07043	Transaction ID: SA11AI.4805
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="200.00"/>
	Name of Employer Self Employed Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="475.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 29		
	<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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms. Mary E Wanderpolo		Date of Receipt	
	Mailing Address 209 Cooper Avenue Suite 2		M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 6	
	City	State	Zip Code	Transaction ID: SA11AI.5990
	Montclair	NJ	07043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		75.00	
Name of Employer Self Employed		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 675.00		

B.	Full Name (Last, First, Middle Initial) Ms. Mary E Wanderpolo		Date of Receipt	
	Mailing Address 209 Cooper Avenue Suite 2		M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
	City	State	Zip Code	Transaction ID: SA11AI.4823
	Montclair	NJ	07043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		200.00	
Name of Employer Self Employed		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 875.00		

C.	Full Name (Last, First, Middle Initial) D. Hershel Wilson		Date of Receipt	
	Mailing Address 149 N. San Gorgiono Ave.		M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
	City	State	Zip Code	Transaction ID: SA11AI.4767
	Banning	CA	92220	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		200.00	
Name of Employer McClellan & Wilson		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional)	▶	475.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 29
(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)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.

Full Name (Last, First, Middle Initial)
D. Hershel Wilson

Mailing Address 149 N. San Gorgiono Ave.

City Banning State CA Zip Code 92220

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

Name of Employer McClellan & Wilson Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 16 / 2006

Transaction ID: SA11AI.4824

Amount of Each Receipt this Period 200.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Mr. Edward E Zetlin

Mailing Address 6066 Leesburg Pike Suite 500

City Arlington State VA Zip Code 22206

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

Name of Employer Legal Services of N Virginia Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 21 / 2006

Transaction ID: SA11AI.5967

Amount of Each Receipt this Period 75.00

C.

Full Name (Last, First, Middle Initial)
Mr. Stuart D Zimring

Mailing Address 12650 Riverside Drive Suite 100

City North Hollywood State CA Zip Code 91607

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

Name of Employer Self Employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 21 / 2006

Transaction ID: SA11AI.5964

Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) ▶ 425.00

TOTAL This Period (last page this line number only) ▶ 36017.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 29

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

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NAME OF COMMITTEE (In Full)

National Academy of Elder Law Attorneys Senior Rights Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) A LOT OF PEOPLE WHO SUPPORT JEFF BINGAMAN</p> <p>Mailing Address PO BOX 16210</p> <p>City ALBUQUERQUE State NM Zip Code 87191</p> <p>Purpose of Disbursement Fundraising Dinner</p> <p>Candidate Name JEFF BINGAMAN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 00</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4828</p> <p>Date of Disbursement 04 / 07 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) BILL NELSON FOR U S SENATE</p> <p>Mailing Address 500 RED SAIL WAY</p> <p>City SATELITE BEACH State FL Zip Code 32937</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name BILL NELSON</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4829</p> <p>Date of Disbursement 04 / 07 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) FRIENDS OF KENT CONRAD</p> <p>Mailing Address PO BOX 812</p> <p>City BISMARCK State ND Zip Code 58502</p> <p>Purpose of Disbursement Fundraiser Lunch</p> <p>Candidate Name GAYLORD KENT CONRAD</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4831</p> <p>Date of Disbursement 06 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Academy of Elder Law Attorneys Senior Rights Political Action Committee

A.	Full Name (Last, First, Middle Initial) FRIENDS OF ROBERT C BYRD COMMITTEE	Transaction ID: SB23.4825 Date of Disbursement
	Mailing Address 1300 CONNECTICUT AVENUE NW STE 600	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
	City WASHINGTON State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name ROBERT C BYRD	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HAWKEYE PAC, THE	Transaction ID: SB23.4827 Date of Disbursement
	Mailing Address PO Box 7255	<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>
	City Des Moines State IA Zip Code 50309	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser Breakfast	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SNOWE FOR SENATE	Transaction ID: SB23.4826 Date of Disbursement
	Mailing Address PO BOX 2006	<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>
	City PORTLAND State ME Zip Code 04104	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Breakfast	<input type="text" value="1000.00"/>
	Candidate Name OLYMPIA J SNOWE	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5500.00"/>