

**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

TO ORGANIZE A MAJORITY PAC (TOMPAC)

ADDRESS (number and street)

PO BOX 752

Check if different  
than previously  
reported. (ACC)

DES MOINES

IA

50303

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00385732

3. IS THIS  
REPORTNEW  
(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

in the  
State of(d) 30-Day  
Post -Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2006

through

09

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

Theresa Kehoe

Signature of Treasurer

Electronically Filed by Theresa Kehoe

Date

12

03

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.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

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		67488.62
(b) Cash on Hand at Beginning of Reporting Period .....	46909.59	
(c) Total Receipts (from Line 19) .....	54822.54	116542.54
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	101732.13	184031.16
7. Total Disbursements (from Line 31) .....	86641.88	168940.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	15090.25	15090.25
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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

TO ORGANIZE A MAJORITY PAC (TOMPAC)

Report Covering the Period:

From:

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

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	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	46285.54	91305.54
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1537.00	2237.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	47822.54	93542.54
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	7000.00	23000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	54822.54	116542.54
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)) .....	54822.54	116542.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	54822.54	116542.54

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	25629.43	41797.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	25629.43	41797.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	61000.00	112500.00
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	9500.00
(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	9500.00
29. Other Disbursements.....	12.45	5143.07
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))..	86641.88	168940.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	86641.88	168940.91

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	54822.54	116542.54
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	9500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	54822.54	107042.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	25629.43	41797.84
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	25629.43	41797.84

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

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

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Syed Bokhari Mailing Address 501 Chaumont Dr City Villanova State PA Zip Code 19085 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Parkway Clinical Labs Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11643 Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Jerry Brown Mailing Address 7622 N Sunset Dr City Saint Louis State MO Zip Code 63121 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Korein Tillery Occupation Investigator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11646 Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) G David Bunning Mailing Address 825 South Waukegan Road A8 #175 City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Money Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11651 Amount of Each Receipt this Period 1800.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		7800.00
<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  
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FOR LINE NUMBER: PAGE 7 / 26

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Denise Bunning Mailing Address 825 South Waukegan Road A8 #175 City State Zip Code Lake Forest IL 60045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11650 Amount of Each Receipt this Period 1800.00
<b>B.</b> Full Name (Last, First, Middle Initial) G Nicholas Cavarocchi Mailing Address Cavarocchi, Rusio and Dennis 316 Pennsylvania Avenue SE #403 City State Zip Code Washington DC 20003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cavarocchi et al Occupation Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11652 Amount of Each Receipt this Period 1500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Chlapaty Mailing Address 4640 Trueman Blvd City State Zip Code Hilliard OH 43026 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Advanced Drainage Systems Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11644 Amount of Each Receipt this Period 5000.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		8300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) B Lyle Dennis Mailing Address 11515 Noahs Landing Court City State Zip Code Manassas VA 20112 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CRD Associates Occupation Gov't Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11640 Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) J Michael Galligan Mailing Address 2425 Jordan Trail City State Zip Code West Des Moines IA 50265 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Galligan Law Firm Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11628 Amount of Each Receipt this Period 5000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Geoff Gonella Mailing Address 4204 Franklin St City State Zip Code Kensington MD 20895 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cornerstone Occupation Gov't Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3685.54		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11716 Amount of Each Receipt this Period 3685.54 In-kind - catering for fundraiser
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		9685.54
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Domenic Ruscio Mailing Address 6100 Westchester Drive #1012 City State Zip Code College Park MD 20740 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation CRD Associates Consultant Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11641 Amount of Each Receipt this Period 1500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Francis Smith Mailing Address 1230 N Westshore Blvd City State Zip Code Manteno IL 60950 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Illinois Diversatech President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2500.00			Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11626 Amount of Each Receipt this Period 2500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Francis Smith Mailing Address 1230 N Westshore Blvd City State Zip Code Manteno IL 60950 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Illinois Diversatech President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11627 Amount of Each Receipt this Period 2500.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			6500.00	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶				

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Alexis Tillery Mailing Address 1000 Washington Ave Apt 623 City State Zip Code Saint Louis MO 63101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Korein Tillery Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11645 Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Katherine Tillery Mailing Address 34 Country Club Pl City State Zip Code Belleville IL 62223 FEC ID number of contributing federal political committee. <b>C</b> 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 ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11647 Amount of Each Receipt this Period 2000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Stephen Tillery Mailing Address 701 Market St Ste 300 City State Zip Code Saint Louis MO 63101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Korein Tillery Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11648 Amount of Each Receipt this Period 2000.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 26

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

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

Sac & Fox Tribe

Mailing Address of the Mississippi in Iowa  
 349 Meskwaki Road

City State Zip Code  
 Tama IA 52339

FEC ID number of contributing  
 federal political committee.

C

Name of Employer  
 Info Requested

Occupation  
 Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.11642

Amount of Each Receipt this Period

5000.00

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

A George Zelcs

Mailing Address 701 Market St #300

City State Zip Code  
 Saint Louis MO 63101

FEC ID number of contributing  
 federal political committee.

C

Name of Employer  
 Korein Tillery LLC

Occupation  
 Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.11649

Amount of Each Receipt this Period

4000.00

SUBTOTAL of Receipts This Page (optional) .....

9000.00

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

46285.54

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

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

Delta-PAC

Mailing Address PO Box 20706

City State Zip Code  
 Atlanta GA 30320

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11C.11654

Amount of Each Receipt this Period

2000.00

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

Sonnenschein Carlin Nath & Rosenthal PAC

Mailing Address 1301 K St NW Ste 600

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 7 / 2 0 0 6

Transaction ID: SA11C.11653

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

7000.00

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

7000.00

# **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 13 / 26

<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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

**A.** Carroll Travel

Mailing Address 201 Mass Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
travel expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.11691

Date of Disbursement

07 / 04 / 2006

Amount of Each Disbursement this Period

332.53

Full Name (Last, First, Middle Initial)

**B.** Carroll Travel

Mailing Address 201 Mass Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
travel expenses airfare, amtrak for TOMPA

Candidate Name

Category/  
Type

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

State: District:

**Transaction ID:** SB21B.11544

Date of Disbursement

08 / 27 / 2006

Amount of Each Disbursement this Period

484.80

Full Name (Last, First, Middle Initial)

**C.** Carroll Travel

Mailing Address 201 Mass Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
travel expenses airfare for TOMPAC

Candidate Name

Category/  
Type

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

State: District:

**Transaction ID:** SB21B.11555

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

1142.50

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

1959.83

**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 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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Carroll Travel</b>		<b>Transaction ID:</b> SB21B.11594 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 6</div> </div>
Mailing Address 201 Mass Ave NE		<b>Amount of Each Disbursement this Period</b> <div>609.40</div>
City Washington State DC Zip Code 20002		
Purpose of Disbursement travel expenses airfare for TOMPAC	<div>Category/Type</div>	
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>B.</b> Full Name (Last, First, Middle Initial) <b>DiNino Associates LLC</b>		<b>Transaction ID:</b> SB21B.11535 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 0 6</div> </div>
Mailing Address 210 Whitestone Road		<b>Amount of Each Disbursement this Period</b> <div>4000.00</div>
City Silver Spring State MD Zip Code 20901		
Purpose of Disbursement fundraising retainer for TOMPAC	<div>Category/Type</div>	
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>C.</b> Full Name (Last, First, Middle Initial) <b>DiNino Associates LLC</b>		<b>Transaction ID:</b> SB21B.11537 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 6</div> </div>
Mailing Address 210 Whitestone Road		<b>Amount of Each Disbursement this Period</b> <div>4000.00</div>
City Silver Spring State MD Zip Code 20901		
Purpose of Disbursement consulting fundraising	<div>Category/Type</div>	
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) .....

**8609.40**

**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 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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) DiNino Associates LLC		<b>Transaction ID:</b> SB21B.11543 <b>Date of Disbursement</b> <div> <div>08</div> <div>27</div> <div>2006</div> </div>
Mailing Address 210 Whitestone Road		<b>Amount of Each Disbursement this Period</b> <div>4000.00</div>
City Silver Spring State MD Zip Code 20901		
Purpose of Disbursement consulting fundraising for TOMPAC	<div>Category/Type</div>	
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>B.</b> Full Name (Last, First, Middle Initial) Geoff Gonella		<b>Transaction ID:</b> SB21B.11718 <b>Date of Disbursement</b> <div> <div>09</div> <div>27</div> <div>2006</div> </div>
Mailing Address 4204 Franklin St		<b>Amount of Each Disbursement this Period</b> <div>3685.54</div>
City Kensington State MD Zip Code 20895		
Purpose of Disbursement In-kind - catering for fundraiser	<div>Category/Type</div>	
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>C.</b> Full Name (Last, First, Middle Initial) Jeremy Gold		<b>Transaction ID:</b> SB21B.11536 <b>Date of Disbursement</b> <div> <div>07</div> <div>02</div> <div>2006</div> </div>
Mailing Address 2801 Quebec St NW #444		<b>Amount of Each Disbursement this Period</b> <div>258.57</div>
City Washington State DC Zip Code 20008		
Purpose of Disbursement travel exp, postage fundraising for TOMP	<div>Category/Type</div>	
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) .....

**7944.11**

**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 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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Jeremy Gold		<b>Transaction ID:</b> SB21B.11538 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 1 / 2 0 0 6</div> </div>
Mailing Address 2801 Quebec St NW #444		<b>Amount of Each Disbursement this Period</b> <div>116.00</div>
City Washington State DC Zip Code 20008		
Purpose of Disbursement travel expenses for fundraising for TOM		
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>B.</b> Full Name (Last, First, Middle Initial) Jeremy Gold		<b>Transaction ID:</b> SB21B.11548 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 3 / 2 0 0 6</div> </div>
Mailing Address 2801 Quebec St NW #444		<b>Amount of Each Disbursement this Period</b> <div>87.00</div>
City Washington State DC Zip Code 20008		
Purpose of Disbursement travel expenses for fundraising for TOM		
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>C.</b> Full Name (Last, First, Middle Initial) Jeremy Gold		<b>Transaction ID:</b> SB21B.11567 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 6</div> </div>
Mailing Address 2801 Quebec St NW #444		<b>Amount of Each Disbursement this Period</b> <div>533.30</div>
City Washington State DC Zip Code 20008		
Purpose of Disbursement travel expenses for fundraising for TOM		
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) .....		<div>736.30</div>
<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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Periwinkle Inn Mailing Address PO Box 1816 City Nantucket State MA Zip Code 02554 Purpose of Disbursement travel expenses for TOMPAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B.11693 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">279.73</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	4		2	0	0	6	279.73									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	7		0	4		2	0	0	6																							
279.73																																
<b>B.</b> Full Name (Last, First, Middle Initial) Science Center of Iowa Mailing Address 401 W MLK Parkway City Des Moines State IA Zip Code 50309 Purpose of Disbursement catering for fundraiser for TOMPAC 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:</b> SB21B.11552 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">540.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	7		2	0	0	6	540.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	9		0	7		2	0	0	6																							
540.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Science Center of Iowa Mailing Address 401 W MLK Parkway City Des Moines State IA Zip Code 50309 Purpose of Disbursement catering for fundraiser for TOMPAC 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:</b> SB21B.11593 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">780.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	6	780.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	9		2	6		2	0	0	6																							
780.00																																

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

1599.73

**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 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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Sharon Haselhoff		<b>Transaction ID:</b> SB21B.11595 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 6</div> </div>	
Mailing Address 1508 42nd St		<b>Amount of Each Disbursement this Period</b> <div>2500.00</div>	
City Des Moines State IA Zip Code 50311	Purpose of Disbursement fundraising consulting fee for TOMPAC Candidate Name	<div>Category/Type</div>	
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>B.</b> Full Name (Last, First, Middle Initial) Spencer's Seattle		<b>Transaction ID:</b> SB21B.11563 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 6</div> </div>	
Mailing Address 17620 Pacific Highway So.		<b>Amount of Each Disbursement this Period</b> <div>210.26</div>	
City Seattle State WA Zip Code 98188	Purpose of Disbursement catering for TOMPAC fundraising Candidate Name	<div>Category/Type</div>	
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>C.</b> Full Name (Last, First, Middle Initial) Theresa Kehoe		<b>Transaction ID:</b> SB21B.11542 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 7 / 2 0 0 6</div> </div>	
Mailing Address 1314 42nd Street		<b>Amount of Each Disbursement this Period</b> <div>500.00</div>	
City Des Moines State IA Zip Code 50311	Purpose of Disbursement contract services compliance for TOMPAC Candidate Name	<div>Category/Type</div>	
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) .....

**3210.26**

**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 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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Theresa Kehoe		<b>Transaction ID:</b> SB21B.11596 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 6</div> </div>	
Mailing Address 1314 42nd Street		<b>Amount of Each Disbursement this Period</b> <div>500.00</div>	
City Des Moines State IA Zip Code 50311	Purpose of Disbursement contract services compliance for TOMPAC Candidate Name	<div>Category/Type</div>	
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>B.</b> Full Name (Last, First, Middle Initial) Whotels Seattle		<b>Transaction ID:</b> SB21B.11566 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 6</div> </div>	
Mailing Address 1112 4th Ave		<b>Amount of Each Disbursement this Period</b> <div>628.16</div>	
City Seattle State WA Zip Code 94109	Purpose of Disbursement hotel travel exp. for tompac Candidate Name	<div>Category/Type</div>	
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) ..... ►

1128.16

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

25187.79

# **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 20 / 26

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

## **A. BOB CASEY FOR PENNSYLVANIA COMMITTEE**

Mailing Address PO BOX 1177

City HARRISBURG State PA Zip Code 17108

Purpose of Disbursement  
Contribution

Candidate Name  
ROBERT P JR CASEY

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.11675

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Boswell for Congress**

Mailing Address Box 6220

City Des Moines State IA Zip Code 50309

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.11676

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. Braley for Congress**

Mailing Address PO Box 390

City Waterloo State IA Zip Code 50704

Purpose of Disbursement  
contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.11677

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

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

10000.00

**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)

PAGE 21 / 26

<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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

**A.** Braley for Congress

Mailing Address PO Box 390

City Waterloo State IA Zip Code 50704

Purpose of Disbursement  
contribution 2006 primary debt

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.11688

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** E. Joyce Schulte for Congress

Mailing Address PO Box 367

City Creston State IA Zip Code 50801

Purpose of Disbursement  
Contribution

Candidate Name  
E JOYCE SCHULTE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 05

**Transaction ID:** SB23.11678

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Friends of Sherrod Brown

Mailing Address 2280 Kresge Dr Suite 800

City Amherst State OH Zip Code 44001

Purpose of Disbursement  
contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.11696

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

11000.00

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Harold Ford Jr for Tennessee		<b>Transaction ID:</b> SB23.11679 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2006</div> </div>
Mailing Address 5120 Barry Road Suite 1300		<b>Amount of Each Disbursement this Period</b> <div>2500.00</div>
City Memphis State TN Zip Code 38117		
Purpose of Disbursement contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) James Webb for US Senate		<b>Transaction ID:</b> SB23.11680 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2006</div> </div>
Mailing Address 1916 Wilson Blvd, Suite 304		<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
City Arlington State VA Zip Code 22201		
Purpose of Disbursement contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) KLOBUCHAR FOR MINNESOTA		<b>Transaction ID:</b> SB23.11672 <b>Date of Disbursement</b> <div> <div>08</div> <div>01</div> <div>2006</div> </div>
Mailing Address 1430 CONCORDIA AVENUE PO BOX 4146		<b>Amount of Each Disbursement this Period</b> <div>2000.00</div>
City SAINT PAUL State MN Zip Code 55104		
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**9500.00**

**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  
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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) <b>KLOBUCHAR FOR MINNESOTA</b>		<b>Transaction ID:</b> SB23.11674 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2006</div> </div>
Mailing Address 1430 CONCORDIA AVENUE PO BOX 4146		Amount of Each Disbursement this Period <div>5000.00</div>
City SAINT PAUL State MN Zip Code 55104	<div>Category/Type</div>	
Purpose of Disbursement contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Loeb sack for Congress</b>		<b>Transaction ID:</b> SB23.11681 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2006</div> </div>
Mailing Address 385 E College St		Amount of Each Disbursement this Period <div>1000.00</div>
City Iowa City State IA Zip Code 52240	<div>Category/Type</div>	
Purpose of Disbursement contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>McCaskill for Missouri</b>		<b>Transaction ID:</b> SB23.11673 <b>Date of Disbursement</b> <div> <div>08</div> <div>01</div> <div>2006</div> </div>
Mailing Address PO Box 6771		Amount of Each Disbursement this Period <div>3000.00</div>
City St Louis State MO Zip Code 63144	<div>Category/Type</div>	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**9000.00**

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

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

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<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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A. McCaskill for Missouri</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 6771 City St Louis State MO Zip Code 63144 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.11682</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 4000.00
<b>B. Menendez for Senate</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 848 City Union City State NJ Zip Code 07087 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.11683</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 5000.00
<b>C. Montanans for Tester</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 1135 City Helena State MT Zip Code 59624 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.11684</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 4000.00

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

13000.00

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



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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

## **A. SESTAK FOR CONGRESS**

Mailing Address P.O. Box 16

City State Zip Code  
Media PA 19063

Purpose of Disbursement  
contribution

Candidate Name  
JOSEPH A JR. SESTAK

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 7

Transaction ID: SB23.11686

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Whitehouse for Senate**

Mailing Address 100 Midway PI #23

City State Zip Code  
Cranston RI 02920

Purpose of Disbursement  
contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.11697

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Whitehouse for Senate**

Mailing Address 100 Midway PI #23

City State Zip Code  
Cranston RI 02920

Purpose of Disbursement  
contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.11687

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

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

8500.00

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

61000.00

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

Use separate schedule(s)  
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

**A.** Bankers Trust

Mailing Address 7th & Grand

City  
Des Moines

State  
IA

Zip Code  
50309

Purpose of Disbursement  
service charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID:** SB29.11698

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12.45

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

12.45

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

12.45