

**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

MAJORITY PAC

ADDRESS (number and street) **551 MAIN STREET**
SUITE 220
 Check if different than previously reported. (ACC) **JOHNSTOWN PA 15901**

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

C00426023 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT (Choose One)** (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

(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)

(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 **TREASURER ROBERT C. ONDICK**

Signature of Treasurer **Electronically Filed by TREASURER ROBERT C. ONDICK** Date **10 12 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											
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FEC FORM 3X
(Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
MAJORITY PAC

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 <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	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	6									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td>256102.00</td></tr></table>	256102.00	<table border="1" style="width: 100%;"><tr><td>256102.00</td></tr></table>	256102.00								
256102.00												
256102.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td>256102.00</td></tr></table>	256102.00	<table border="1" style="width: 100%;"><tr><td>256102.00</td></tr></table>	256102.00								
256102.00												
256102.00												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td>205862.08</td></tr></table>	205862.08	<table border="1" style="width: 100%;"><tr><td>205862.08</td></tr></table>	205862.08								
205862.08												
205862.08												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td>50239.92</td></tr></table>	50239.92	<table border="1" style="width: 100%;"><tr><td>50239.92</td></tr></table>	50239.92								
50239.92												
50239.92												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
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
MAJORITY PAC

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

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	130950.00	130950.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	50.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	131000.00	131000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	125000.00	125000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	256000.00	256000.00
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)	102.00	102.00
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))	256102.00	256102.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	256102.00	256102.00

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.....	100862.08	100862.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	100862.08	100862.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	92000.00	92000.00
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.....	13000.00	13000.00
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))..	205862.08	205862.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	205862.08	205862.08

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)	256000.00	256000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	256000.00	256000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	100862.08	100862.08
37. Offsets to Operating Expenditures (from Line 15, page 3)	102.00	102.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	100760.08	100760.08

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Terry D. Bevels		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 1626 Hunting Creek Dr		Transaction ID: SA11A1.4154
City Alexandria	State VA	Zip Code 22314-6222
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Robert A. Borski		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 4015 Fidler Street		Transaction ID: SA11A1.4251
City Philadelphia	State PA	Zip Code 19114
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Borski Associates	Occupation Self Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. JoAnne Boyle		Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2006
Mailing Address Baywood Road Box 400		Transaction ID: SA11A1.4240
City Laughlintown	State PA	Zip Code 15655
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Seton Hill University	Occupation President	
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)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. William J. Boyle		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 2809 Central Avenue		Transaction ID: SA11A1.4125	
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Fibergate Inc	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Marshall A. Brachman		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 634 A St NE		Transaction ID: SA11A1.4152	
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Marshall A. Brachman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 18 / 2006	
Mailing Address 634 A St NE		Transaction ID: SA11A1.4456	
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00		

SUBTOTAL of Receipts This Page (optional) ▶	9000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Thomas Brady		Date of Receipt MM / DD / YYYY 07 / 31 / 2006
Mailing Address 100 Charles River Plaza Suite 400		Transaction ID: SA11A1.4224
City Boston	State MA	Zip Code 02114
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Partners Health Care	Occupation MD, CIMIT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Timothy J. Bromelkamp		Date of Receipt MM / DD / YYYY 07 / 31 / 2006
Mailing Address 333 Helen Street		Transaction ID: SA11A1.4159
City Alexandria	State VA	Zip Code 22305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer KSA Consultants	Occupation VP Legislative Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. L.M. Brown, Jr		Date of Receipt MM / DD / YYYY 07 / 31 / 2006
Mailing Address 4801 Maury lane		Transaction ID: SA11A1.4127
City Alexandria	State VA	Zip Code 22304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer ProLogic	Occupation Corp. Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Martha L. Casey		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 1310 19th Street NW		Transaction ID: SA11A1.4161	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer O'Neill Athy Casey	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Loretta P. Cassidy		Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2006	
Mailing Address 700 13th Street NW Suite 400		Transaction ID: SA11A1.4238	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. William Coyle		Date of Receipt M M / D D / Y Y Y Y Y 08 / 09 / 2006	
Mailing Address 201 Melvin Street		Transaction ID: SA11A1.4287	
City State Zip Code Johnstown PA 15904	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CTC	Occupation Facilites Coordinator		
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) ▶	3250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Janice Crosby		Date of Receipt MM / DD / YYYY 07 / 31 / 2006
Mailing Address 27 Martin Drive		Transaction ID: SA11A1.4228
City Sudbury	State MA	Zip Code 01776
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Partners Healthcare	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Daniel R. Cunningham		Date of Receipt MM / DD / YYYY 07 / 31 / 2006
Mailing Address 7806 Creekside View Lane		Transaction ID: SA11A1.4129
City Springfield	State VA	Zip Code 22153
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer The PMA Group	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. David R. Davis		Date of Receipt MM / DD / YYYY 07 / 30 / 2006
Mailing Address 130 Gayview Terrace		Transaction ID: SA11A1.4242
City Johnstown	State PA	Zip Code 15905
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer MountainTop Tech Inc	Occupation President	
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)	▶	6250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 80
	<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)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
Daniel R. Devos

Mailing Address 121 Point Circle Drive

City State Zip Code
Central City PA 15926

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

Name of Employer Occupation
CTC President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2006

Transaction ID: SA11A1.4163

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Joseph K. Dowley

Mailing Address 8417 Martindale Drive

City State Zip Code
McLean VA 22102

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

Name of Employer Occupation
McKenna, Long & Aldridge Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2006

Transaction ID: SA11A1.4255

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
James B. Ellis, II

Mailing Address 2202 Foxboro Place
NW

City State Zip Code
Washington DC 20007-1121

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

Name of Employer Occupation
Blank Rome LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2006

Transaction ID: SA11A1.4281

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. James L. Ervin		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006
Mailing Address 116 Queen Street		Transaction ID: SA11A1.4277
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer ETA Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Charles F. Feldmayer		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006
Mailing Address 4309 Southwood Drive		Transaction ID: SA11A1.4273
City State Zip Code Alexandria VA 22309	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Talley Defense Systems	Occupation Dir of Mkt & Govt Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Julia Giardina		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006
Mailing Address 4500 28th Rd S Unit D		Transaction ID: SA11A1.4131
City State Zip Code Arlington VA 22206	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The PMA Group	Occupation Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Rebecca L. Halkias		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 317 C. Street NE		Transaction ID: SA11A1.4165	
City Washington	State DC	Amount of Each Receipt this Period 1000.00	
Zip Code 20002			
FEC ID number of contributing federal political committee. C			
Name of Employer C2 Group LLC	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Rebecca L. Halkias		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2006	
Mailing Address 317 C. Street NE		Transaction ID: SA11A1.4457	
City Washington	State DC	Amount of Each Receipt this Period 1000.00	
Zip Code 20002			
FEC ID number of contributing federal political committee. C			
Name of Employer C2 Group LLC	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Gerald T. Harrington		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2006	
Mailing Address 209 Blackberry Hill Drive		Transaction ID: SA11A1.4450	
City S Kingstown	State RI	Amount of Each Receipt this Period 2500.00	
Zip Code 02879			
FEC ID number of contributing federal political committee. C			
Name of Employer Capitol City Group LTD	Occupation Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Scott A. Harshman		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 217 Murdock Way		Transaction ID: SA11A1.4167
City Greensburg	State PA	Zip Code 15601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer GSP Consulting Corp	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. James C. Healey, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 1801 K Street NW Ste 901 L		Transaction ID: SA11A1.4169
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer BKSH & Associates	Occupation Lobbyist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Capt. Stephen J. Hollis, USN		Date of Receipt M M / D D / Y Y Y Y Y 08 / 09 / 2006
Mailing Address 8318 Cathedral Forest Dr		Transaction ID: SA11A1.4283
City Fairfax Station	State VA	Zip Code 22039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Sabeus Inc	Occupation Executive VP	
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)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Jill Yacone Hopper		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 8 Alexandria		Transaction ID: SA11A1.4222	
City Alexandria	State VA	Zip Code 22314	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer SRA Intl Inc	Occupation VP Govt Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Robert Hytner		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 3924 Cobbler Mountain Rd		Transaction ID: SA11A1.4171	
City Delaplane	State VA	Zip Code 20144	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer BKSH & Associates	Occupation Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. F. Nicholas Jacobs		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 2767 Carpenter Park Road		Transaction ID: SA11A1.4173	
City Davidsville	State PA	Zip Code 15928	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Windber Medl Center	Occupation President		
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) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 80
	<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)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
Nicholas E. Karangelen

Mailing Address 3100 N. Nelson Street

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Trident Systems Inc President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2006

Transaction ID: SA11A1.4175

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Walter J. Keller, III

Mailing Address 103 Firwood Drive

City State Zip Code
Bridgeville PA 15017

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

Name of Employer Occupation
Nokomis, Inc CEO & President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 30 / 2006

Transaction ID: SA11A1.4244

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Shoun T. Kerbaugh

Mailing Address 428 Pine Valley Drive

City State Zip Code
Bridgeville PA 15017

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

Name of Employer Occupation
Converteam Inc President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2006

Transaction ID: SA11A1.4100

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Colleen M. Kigin		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 53 Dale Street		Transaction ID: SA11A1.4177	
City State Zip Code Swapscott MA 01907	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Partners Health Care	Occupation Chief of Staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. L. Robert Kimball		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 615 W Highland Avenue		Transaction ID: SA11A1.4179	
City State Zip Code Ebenesburg PA 15931	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer L. Robert Kimball & Assoc.	Occupation Principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Jean M. Kitonis		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 9760 Tico Lane		Transaction ID: SA11A1.4135	
City State Zip Code Bristow VA 20136	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Progeny Systems Corp	Occupation CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Walter P. Kionis		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 9760 Tico Lane		Transaction ID: SA11A1.4133	
City State Zip Code Bristow VA 20136	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Progeny Systems Occupation Administrator	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ronald P. Klink		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 3410 Lashan Drive		Transaction ID: SA11A1.4181	
City State Zip Code Murrysville PA 15668	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ron Klink & Assoc. Occupation President	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Melissa A. Koloszar		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 106 S Wise Street		Transaction ID: SA11A1.4137	
City State Zip Code Arlington VA 22204	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The PMA Group Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 80
	<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)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
Lena C. Kuchera

Mailing Address 1800 Dolphin Drive

City State Zip Code
Johnstown PA 15904

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2006

Transaction ID: SA11A1.4403

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Lisa M. Kuchera

Mailing Address 1125 Weaver Street

City State Zip Code
Johnstown PA 15904

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2006

Transaction ID: SA11A1.4401

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ronald Kuchera

Mailing Address 345 Hillside Drive

City State Zip Code
Windber PA 15963

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

Name of Employer Occupation
Kuchera Industries CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2006

Transaction ID: SA11A1.4294

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. William Kuchera		Date of Receipt M M / D D / Y Y Y Y Y 08 / 30 / 2006
Mailing Address 1800 DOLphin Drive		Transaction ID: SA11A1.4399
City Johnstown	State PA	Zip Code 15904
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Kuchera Industries	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Enrique J. Lenz		Date of Receipt M M / D D / Y Y Y Y Y 08 / 07 / 2006
Mailing Address 1303 Aldbury Way		Transaction ID: SA11A1.4271
City Reston	State VA	Zip Code 20194
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Mobilvox, Inc.	Occupation Mobility Tech.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Zel Lipsen		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 6842 Elm Street Suite 209		Transaction ID: SA11A1.4183
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
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 ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 80
	<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)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
Adm. Thomas J. Lopez

Mailing Address 7000 Infantry Ridge Road

City Manassas State VT Zip Code 20109

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

Name of Employer Info Manufacturing Corp Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
07 / 31 / 2006

Transaction ID: SA11A1.4185

Amount of Each Receipt this Period
1000.00

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

Mailing Address 12769 Quarterhorse Lane

City Woodbridge State VA Zip Code 22192

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

Name of Employer PMA Group Occupation Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
07 / 31 / 2006

Transaction ID: SA11A1.4139

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Ajay K. Madan

Mailing Address 4621 24th Road North

City Arlington State VA Zip Code 22207

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

Name of Employer OST Occupation COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
08 / 23 / 2006

Transaction ID: SA11A1.4324

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 11000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 80
	<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)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial) Paul J. Magloicchetti		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 1101 S. Arlington Ridge Rd Apt 616		Transaction ID: SA11A1.4141	
City Arlington	State VA	Zip Code 22202-1926	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer PMA Group	Occupation President		
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) Daniel J. McAuliffe		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 18 Richardson Avenue		Transaction ID: SA11A1.4231	
City Wakefield	State MA	Zip Code 01880	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Partners Healthcare	Occupation Service Adm. Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Charlie McBride		Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006	
Mailing Address 1702 19th Street, NW		Transaction ID: SA11A1.4102	
City Washington	State DC	Zip Code 20009	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capital Tech Group Inc	Occupation Partner		
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) ▶	6250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 80
	<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)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
Milion Bruce Meredith

Mailing Address 3902 McKinley Street NW

City Washington State DC Zip Code 20015-2943

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

Name of Employer Bruce Meredith Inc Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 30 / 2006

Transaction ID: SA11A1.4237

Amount of Each Receipt this Period
1000.00

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

Mailing Address P.O. Box 2237

City Wilkes-Barre State PA Zip Code 18703

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

Name of Employer Edward Mitchell Communication Occupation Self Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 13 / 2006

Transaction ID: SA11A1.4108

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Kathleen J Murphy

Mailing Address 1123 Crest Lane

City McLean State VA Zip Code 22101

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

Name of Employer Sidley Austen Brown & Wood Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2006

Transaction ID: SA11A1.4187

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Mark W. Murray		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006
Mailing Address 6511 Princeton Dr		Transaction ID: SA11A1.4226
City State Zip Code Alexandria VA 22307	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Riper Rudnick	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ronald S. Newbower		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2006
Mailing Address 159 Nagog Hill Road		Transaction ID: SA11A1.4248
City State Zip Code Acton MA 01720	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Partners Healthcare System Inc	Occupation VP Research Mgt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Christopher R. O'Neill		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006
Mailing Address 1310 19th St NW		Transaction ID: SA11A1.4189
City State Zip Code Washington DC 20036-1602	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer O'Neill Athy & Casey PC	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) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Susan O'Neill		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2006	
Mailing Address 5910 Gloster Road		Transaction ID: SA11A1.4106	
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Susan O'Neill & Assoc	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. John A. Parrish		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 55 Fruit Street		Transaction ID: SA11A1.4191	
City State Zip Code Boston MA 02114	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer MA Genl Hospital	Occupation MD Dept of Dermatology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. George J. Pedersen		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006	
Mailing Address 700 Potomac Knolls Drive		Transaction ID: SA11A1.4275	
City State Zip Code McLean VA 22102-1422	Amount of Each Receipt this Period 4200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer ManTech Intl	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00		

SUBTOTAL of Receipts This Page (optional) ▶	6200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Daniel T. Perkins		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 1602 Ivanhoe Court		Transaction ID: SA11A1.4193	
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer MTS Tech Inc	Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Dino S. Persio		Date of Receipt M M / D D / Y Y Y Y Y 08 / 07 / 2006	
Mailing Address 129 S. Center Street		Transaction ID: SA11A1.4269	
City State Zip Code Ebensburg PA 15931-0239	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
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 ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Frank N. Piasecki		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address Tunbridge Road		Transaction ID: SA11A1.4195	
City State Zip Code Haverford PA 19041	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Piasecki Aircraft Corp	Occupation President		
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) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 80
	<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)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial) Frederick W. Piasecki		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006
Mailing Address 1Buck Lane Apt 4B		Transaction ID: SA11A1.4197
City Haverford	State PA	Zip Code 19106-3031
Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Piasecki Aircraft Corp	Occupation VP, Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) John W. Piasecki		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006
Mailing Address 106 S. Front St Apt 4B		Transaction ID: SA11A1.4199
City Philadelphia	State PA	Zip Code 19106-3031
Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Piasecki Aircraft Corp	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Colette M. Pollock		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address 1202 Walter St SE		Transaction ID: SA11A1.4462
City Washington	State DC	Zip Code 20003-1448
Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Van Scoyoc Associates	Occupation Associate VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 80
	<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)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial) George W. Poole		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 2350 S Arlington Ride Rd		Transaction ID: SA11A1.4201	
City Arlington	State VA	Zip Code 22202	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Elaine M. Richardson		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 4 Charlesgate East No. 802		Transaction ID: SA11A1.4233	
City Boston	State MA	Zip Code 02215	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Parnters Healthcare	Occupation Marketing Exec		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) S. Kent Rockwell		Date of Receipt M M / D D / Y Y Y Y Y 08 / 10 / 2006	
Mailing Address 960 Penn Avenue		Transaction ID: SA11A1.4299	
City Pittsburgh	State PA	Zip Code 15222-3811	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer SenSy Tech.	Occupation Chairman		
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) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Edward J. Sheehan, Jr.		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 802 Luzerne Street		Transaction ID: SA11A1.4203	
City State Zip Code Johnstown PA 15905-2349	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CTC	Occupation Sr VP & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Eli R. Shumar, Jr.		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 432 Stone Church Road		Transaction ID: SA11A1.4205	
City State Zip Code Grindstone PA 15442	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Shumar's Welding & Machine	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Paul G. Smith		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 9802 Pippermill Pl		Transaction ID: SA11A1.4207	
City State Zip Code Vienna VA 22182-1957	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer ITAC	Occupation Engineer		
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) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 80
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. William E. Sudow		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 1123 Crest Lane		Transaction ID: SA11A1.4209	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 1000.00		
Name of Employer Sidley Austin LLP	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Willaim A. Thomasmeyer		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2006	
Mailing Address 218 Timber Ridge Road		Transaction ID: SA11A1.4246	
City State Zip Code Pittsburgh PA 15238	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 1000.00		
Name of Employer The Technology Collaborat-ive	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Monte Treasure		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 3 Overlook Drive		Transaction ID: SA11A1.4253	
City State Zip Code Pelham NH 03076	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 1000.00		
Name of Employer Specialty Materials Inc	Occupation President		
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)	3000.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Kirby Gannett Vosburgh		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 10 Pickwick Rd		Transaction ID: SA11A1.4235	
City Newton	State MA	Amount of Each Receipt this Period 250.00	
Zip Code 02464			
FEC ID number of contributing federal political committee. C			
Name of Employer MA Genl Hospital	Occupation Assoc Dir CIMIT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Richard I. Weiss		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 106 Canfield Hill Drive		Transaction ID: SA11A1.4211	
City Gaithersburg	State MD	Amount of Each Receipt this Period 1000.00	
Zip Code 20878			
FEC ID number of contributing federal political committee. C			
Name of Employer KSA Consulting	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Major Genl Randall L. West		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 1 Massachusetts Avenue NW Suite 880		Transaction ID: SA11A1.4214	
City Washington	State DC	Amount of Each Receipt this Period 1000.00	
Zip Code 20001			
FEC ID number of contributing federal political committee. C			
Name of Employer Robinson Intl Inc	Occupation President & COO		
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) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 80						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial) Barton W. Whitman		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 2800 Shirlington Road #1000		Transaction ID: SA11A1.4216	
City Arlington	State VA	Zip Code 22206	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer MTS Tech Inc	Occupation Sr VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Richard C. Whitner		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 2300 Clarendon Blvd Ste 402		Transaction ID: SA11A1.4218	
City Arlington	State VT	Zip Code 22201-3367	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer RC Whitner & Assoc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Charles Wilson		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006	
Mailing Address 305 Augusta Drive		Transaction ID: SA11A1.4279	
City Lufkin	State TX	Zip Code 75901	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 80
	<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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. James L. Witten		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 1725 DeSales St NW Ste 800		Transaction ID: SA11A1.4220	
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Whitten & Diamond	Occupation Attorney at Law		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Paul Zito		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 621 Hunt Valley Circle		Transaction ID: SA11A1.4256	
City New Kensington State PA Zip Code 15068	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Bacharach Inc	Occupation Chairman & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. Barbara Ziv		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006	
Mailing Address 3450 SW 130th Ave.		Transaction ID: SA11A1.4285	
City Davie State FL Zip Code 33330	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Housewife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	130950.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. ADVANCED ACOUSTIC CONCEPTS INC POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 425 OSER AVENUE		<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 07 / 26 / 2006
City	State	Zip Code
HAUPPAUGE	NY	11788
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4117
C C00366385		Amount of Each Receipt this Period
		5000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	5000.00	

Full Name (Last, First, Middle Initial) B. AIR PRODUCTS AND CHEMICALS INC. POLITICAL ALLIANCE		Date of Receipt
Mailing Address P.O. Box 441		<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 09 / 18 / 2006
City	State	Zip Code
Trexlerstown	PA	18087
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4454
C C00127258		Amount of Each Receipt this Period
		5000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	5000.00	

Full Name (Last, First, Middle Initial) C. AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED		Date of Receipt
Mailing Address 1625 L STREET NW		<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 09 / 11 / 2006
City	State	Zip Code
WASHINGTON	DC	20036
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4448
C C00011114		Amount of Each Receipt this Period
		2500.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	2500.00	

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. AMO VOLUNTARY PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006
Mailing Address 2 W DIXIE HWY		Transaction ID: SA11C.4257
City State Zip Code DANIA BEACH FL 33004	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00426023		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. ANALYTICAL GRAPHICS INC PAC (AGI PAC)		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006
Mailing Address 220 Valley Creek Blvd.		Transaction ID: SA11C.4260
City State Zip Code Exton PA 19341	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C C00370023		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2006
Mailing Address 1300 North 17th Street Suite 1400		Transaction ID: SA11C.4113
City State Zip Code Arlington VA 22209	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00281212		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. BOEING POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2006	
Mailing Address 1200 Wilson Blvd		Transaction ID: SA11C.4396	
City State Zip Code Arlington VA 22209	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00142711			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. BROWN AND COMPANY INC PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 600 PENNSYLVANIA AVE SE SUITE 304		Transaction ID: SA11C.4157	
City State Zip Code WASHINGTON DC 20003	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00326405			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. CITIZENS FOR RESPONSIBLE GOVERNMENT-EMPLOYEES OF MSE INC		Date of Receipt M M / D D / Y Y Y Y 08 / 23 / 2006	
Mailing Address PO BOX 4078		Transaction ID: SA11C.4326	
City State Zip Code BUTTE MT 59702	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C C00218131			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. DRS TECHNOLOGIES INC. GOOD GOVERNMENT FUND		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2006	
Mailing Address 5 Sylvan Way SUITE 500		Transaction ID: SA11C.4305	
City Parsippany State NJ Zip Code 07054	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00275123			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. DUANE MORRIS GOVERNMENT COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 30 South 17th Street One Liberty Place		Transaction ID: SA11C.4464	
City Philadelphia State PA Zip Code 19103	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00364133			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2006	
Mailing Address 520 S. GRAND AVE. STE. 700		Transaction ID: SA11C.4405	
City LOS ANGELES State CA Zip Code 90071	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00088591			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN (GDVPCP)		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2006
Mailing Address 2941 Fairview Park Dr. Suite 100		Transaction ID: SA11C.4119
City Falls Church	State VA	Zip Code 22042
FEC ID number of contributing federal political committee. C C00078451		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 08 / 15 / 2006
Mailing Address 1299 Pennsylvania Ave NW Ste 1100		Transaction ID: SA11C.4307
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C C00024869		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL UNION OF N.A.		Date of Receipt M M / D D / Y Y Y Y Y 09 / 14 / 2006
Mailing Address 905 16th St. N.W. Second Floor		Transaction ID: SA11C.4452
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C C00007922		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. LOCKHEED MARTIN EMPLOYEES' POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2006
Mailing Address 1550 Crystal Drive Suite 300		Transaction ID: SA11C.4408
City Arlington State VA Zip Code 22202	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00303024		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. MILLENNIUM CELL POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006
Mailing Address ONE INDUSTRIAL WAY WEST		Transaction ID: SA11C.4311
City EATONTOWN State NJ Zip Code 07724	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00398545		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. PARAMETRIC TECHNOLOGY CORPORATION (PTC) PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2006
Mailing Address 1890 Preston White Drive Ste 200		Transaction ID: SA11C.4505
City Reston State VA Zip Code 20191	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00410688		
Name of Employer	Occupation	
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) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. PARSONS CORPORATION POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 08 / 07 / 2006	
Mailing Address 100 West Walnut Street T-1110		Transaction ID: SA11C.4262	
City Pasadena State CA Zip Code 91124	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00103549			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT		Date of Receipt M M / D D / Y Y Y Y Y 08 / 21 / 2006	
Mailing Address 815 16th St. NW Suite 600		Transaction ID: SA11C.4318	
City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00003160			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. PROLOGIC INC PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 1000 TECHNOLOGY DRIVE SUITE 3140		Transaction ID: SA11C.4144	
City FAIRMONT State WV Zip Code 26554	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00369835			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	12500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 1100 Wilson Boulevard Suite 1500		Transaction ID: SA11C.4146
City Arlington State VA Zip Code 22209	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00097568		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. SCIENCE APPLICATIONS INTERNATIONAL CORPORATION VOLUNTARY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 08 / 16 / 2006
Mailing Address 10260 CAMPUS POINT DRIVE F2		Transaction ID: SA11C.4309
City SAN DIEGO State CA Zip Code 92121	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00300418		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. SHEET METAL WORKER'S INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE PAL		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2006
Mailing Address 1750 NEW YORK AVE NW		Transaction ID: SA11C.4115
City WASHINGTON State DC Zip Code 20006	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C70001136		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 80
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. SIEMENS CORPORATION POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 701 PENNSYLVANIA AVENUE NW SUITE 720		<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 07 / 31 / 2006
City	State	Zip Code
WASHINGTON	DC	20004
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4150
C C00353797		Amount of Each Receipt this Period
		3000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	3000.00	

Full Name (Last, First, Middle Initial) B. SIERRA NEVADA PAC		Date of Receipt
Mailing Address P.O. Box 50193		<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 08 / 07 / 2006
City	State	Zip Code
Sparks	NV	89434
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4266
C C00367995		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00	

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES CO FREEDOM FUND		Date of Receipt
Mailing Address PO BOX 36611 HDQ 4GA		<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 08 / 22 / 2006
City	State	Zip Code
DALLAS	TX	75235
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4322
C C00341602		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. SUN PAC		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6	
Mailing Address 1735 MARKET STREET SUITE LL		Transaction ID: SA11C.4320	
City PHILADELPHIA State PA Zip Code 19103	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00025346			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. TEXTRON INC. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 6	
Mailing Address 40 WESTMINSTER STREET		Transaction ID: SA11C.4292	
City PROVIDENCE State RI Zip Code 02903	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C C00123612			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. TEXTRON INC. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 40 WESTMINSTER STREET		Transaction ID: SA11C.4407	
City PROVIDENCE State RI Zip Code 02903	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C C00123612			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 80		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006
Mailing Address 80 WEST END AVENUE		Transaction ID: SA11C.4507
City NEW YORK	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C C00008268		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address 8000 EAST JEFFERSON		Transaction ID: SA11C.4466
City DETROIT	State MI	Zip Code 48214
FEC ID number of contributing federal political committee. C C00002840		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. UNITED MINE WORKERS OF AMERICA - COAL MINERS POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 8315 LEE HIGHWAY FIFTH FLOOR		Transaction ID: SA11C.4148
City FAIRFAX	State VA	Zip Code 22031
FEC ID number of contributing federal political committee. C C00013342		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. UNITED STATES STEEL CORPORATION PAC		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 6
Mailing Address 600 Grant Street Room 675		Transaction ID: SA11C.4290 Amount of Each Receipt this Period 5000.00
City Pittsburgh State PA Zip Code 15219	FEC ID number of contributing federal political committee. C C00030676	
Name of Employer	Occupation	Amount of Each Receipt this Period 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. WASHINGTON GROUP INTERNATIONAL INC. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address 2345 Crystal Drive Suite 708		Transaction ID: SA11C.4264 Amount of Each Receipt this Period 5000.00
City Arlington State VA Zip Code 22202	FEC ID number of contributing federal political committee. C C00097550	
Name of Employer	Occupation	Amount of Each Receipt this Period 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶	125000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. B P S Printing & Graphics Inc		Transaction ID: SB21B.4371 Date of Disbursement MM / DD / YYYY 08 / 14 / 2006
Mailing Address 4474 White Plains Lane		Amount of Each Disbursement this Period 2000.00
City White Plains State MD Zip Code 20695-3019	Purpose of Disbursement Fund Raiser Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 007

Full Name (Last, First, Middle Initial) B. David R. Charkins, II		Transaction ID: SB21B.4385 Date of Disbursement MM / DD / YYYY 08 / 23 / 2006
Mailing Address 605 Main Street		Amount of Each Disbursement this Period 790.00
City Johnstown State PA Zip Code 15901	Purpose of Disbursement Rent Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. Cingular One		Transaction ID: SB21B.4412 Date of Disbursement MM / DD / YYYY 08 / 28 / 2006
Mailing Address 5020 Ash Grove Road		Amount of Each Disbursement this Period 91.61
City Springfield State IL Zip Code 62711-6329	Purpose of Disbursement Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	2881.61
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Cingular One		Transaction ID: SB21B.4491 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 5020 Ash Grove Road		Amount of Each Disbursement this Period 91.21
City Springfield State IL Zip Code 62711-6329	001 Category/ Type	
Purpose of Disbursement Telephone Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Michael Duga		Transaction ID: SB21B.4492 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 1440 Coral Seal Ridge		Amount of Each Disbursement this Period 5550.71
City Coral Springs State FL Zip Code 33071	001 Category/ Type	
Purpose of Disbursement See Detail Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Michael Duga		Transaction ID: SB21B.4492.0 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 1440 Coral Seal Ridge		Amount of Each Disbursement this Period 2049.19 [MEMO ITEM]
City Coral Springs State FL Zip Code 33071	Category/ Type	
Purpose of Disbursement Reimb Lodging Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	5641.92
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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Michael Duga		Transaction ID: SB21B.4492.1 Date of Disbursement 09 / 18 / 2006	
Mailing Address 1440 Coral Seal Ridge		Amount of Each Disbursement this Period 396.62	
City Coral Springs State FL Zip Code 33071	Purpose of Disbursement Reimb Meals	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	[MEMO ITEM]		

Full Name (Last, First, Middle Initial) B. Michael Duga		Transaction ID: SB21B.4492.2 Date of Disbursement 09 / 18 / 2006	
Mailing Address 1440 Coral Seal Ridge		Amount of Each Disbursement this Period 107.67	
City Coral Springs State FL Zip Code 33071	Purpose of Disbursement Reimb Meeting Exp	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	[MEMO ITEM]		

Full Name (Last, First, Middle Initial) C. Michael Duga		Transaction ID: SB21B.4492.3 Date of Disbursement 09 / 18 / 2006	
Mailing Address 1440 Coral Seal Ridge		Amount of Each Disbursement this Period 969.79	
City Coral Springs State FL Zip Code 33071	Purpose of Disbursement Reimb Office Expenses	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	[MEMO ITEM]		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Michael Duga		Transaction ID: SB21B.4492.4 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address 1440 Coral Seal Ridge		Amount of Each Disbursement this Period 2027.44
City Coral Springs State FL Zip Code 33071	Purpose of Disbursement Reimb Travel 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) ▼	[MEMO ITEM]
Category/Type 001		

Full Name (Last, First, Middle Initial) B. First Comm. Bank, Credit Card Dept		Transaction ID: SB21B.4494 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address PO Box 0537		Amount of Each Disbursement this Period 12946.75
City Indiana State PA Zip Code 15701	Purpose of Disbursement See Detail 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) ▼	[MEMO ITEM]
Category/Type 001		

Full Name (Last, First, Middle Initial) C. Circuit City		Transaction ID: SB21B.4494.0 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address Town Centre Drive		Amount of Each Disbursement this Period 1529.63
City Johnstown State PA Zip Code 15904	Purpose of Disbursement Office Expenses 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) ▼	[MEMO ITEM]
Category/Type 001		

SUBTOTAL of Disbursements This Page (optional) ▶	12946.75
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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. U S Airways		Transaction ID: SB21B.4494.2 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address P.O. Box 12346		Amount of Each Disbursement this Period 1129.30
City Pittsburgh State PA Zip Code 15231	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. U S Airways		Transaction ID: SB21B.4494.3 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address P.O. Box 12346		Amount of Each Disbursement this Period 1129.30
City Pittsburgh State PA Zip Code 15231	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: SB21B.4494.4 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address Galleria Drive		Amount of Each Disbursement this Period 260.81
City Johnstown State PA Zip Code 15904	[MEMO ITEM]	
Purpose of Disbursement Office Expense Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Circuit City		Transaction ID: SB21B.4494.5	
Mailing Address Town Centre Drive		Date of Disbursement MM / DD / YYYY 09 / 18 / 2006	
City Johnstown	State PA	Zip Code 15904	Amount of Each Disbursement this Period 529.99
Purpose of Disbursement Office Expense	001 Category/ Type		
Candidate Name	[MEMO ITEM]		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: SB21B.4494.6	
Mailing Address Galleria Drive		Date of Disbursement MM / DD / YYYY 09 / 18 / 2006	
City Johnstown	State PA	Zip Code 15904	Amount of Each Disbursement this Period 284.89
Purpose of Disbursement Office Expense	001 Category/ Type		
Candidate Name	[MEMO ITEM]		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. First Comm. Bank, Credit Card Dept		Transaction ID: SB21B.4494.8	
Mailing Address PO Box 0537		Date of Disbursement MM / DD / YYYY 09 / 18 / 2006	
City Indiana	State PA	Zip Code 15701	Amount of Each Disbursement this Period 3.50
Purpose of Disbursement Fees	001 Category/ Type		
Candidate Name	[MEMO ITEM]		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	0.00
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 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. United		Transaction ID: SB21B.4494.12 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 1434.60
City Arlington State VA Zip Code 22227	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. United		Transaction ID: SB21B.4494.13 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 1434.60
City Arlington State VA Zip Code 22227	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. United		Transaction ID: SB21B.4494.14 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 1434.60
City Arlington State VA Zip Code 22227	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Goodwin Hotel		Transaction ID: SB21B.4494.15 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address One Haynes Street		Amount of Each Disbursement this Period 278.88
City Hartford State CT Zip Code 06103	[MEMO ITEM]	
Purpose of Disbursement Lodging Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Goodwin Hotel		Transaction ID: SB21B.4494.16 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address One Haynes Street		Amount of Each Disbursement this Period 211.68
City Hartford State CT Zip Code 06103	[MEMO ITEM]	
Purpose of Disbursement Lodging Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Goodwin Hotel		Transaction ID: SB21B.4494.17 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address One Haynes Street		Amount of Each Disbursement this Period 215.68
City Hartford State CT Zip Code 06103	[MEMO ITEM]	
Purpose of Disbursement Lodging Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Goodwin Hotel		Transaction ID: SB21B.4494.18 Date of Disbursement MM / DD / YYYY 09 / 18 / 2006
Mailing Address One Haynes Street		Amount of Each Disbursement this Period 22.27
City Hartford State CT Zip Code 06103	[MEMO ITEM]	
Purpose of Disbursement Lodging Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Silverado Front Desk		Transaction ID: SB21B.4494.19 Date of Disbursement MM / DD / YYYY 09 / 18 / 2006
Mailing Address 1600 Atlas Peak Road		Amount of Each Disbursement this Period 483.05
City Napa State CA Zip Code 94558	[MEMO ITEM]	
Purpose of Disbursement Lodging Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Silverado Front Desk		Transaction ID: SB21B.4494.20 Date of Disbursement MM / DD / YYYY 09 / 18 / 2006
Mailing Address 1600 Atlas Peak Road		Amount of Each Disbursement this Period 484.14
City Napa State CA Zip Code 94558	[MEMO ITEM]	
Purpose of Disbursement Lodging Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Silverado Front Desk		Transaction ID: SB21B.4494.21 Date of Disbursement MM / DD / YYYY 09 / 18 / 2006
Mailing Address 1600 Atlas Peak Road		Amount of Each Disbursement this Period 10.00
City Napa State CA Zip Code 94558	Purpose of Disbursement Lodging 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) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Westin Hotel		Transaction ID: SB21B.4494.23 Date of Disbursement MM / DD / YYYY 09 / 18 / 2006
Mailing Address 1 Old Bayshore Hwy		Amount of Each Disbursement this Period 176.00
City Millbrae State CA Zip Code 94030	Purpose of Disbursement Lodging 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) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Westin Hotel		Transaction ID: SB21B.4494.24 Date of Disbursement MM / DD / YYYY 09 / 18 / 2006
Mailing Address 1 Old Bayshore Hwy		Amount of Each Disbursement this Period 551.33
City Millbrae State CA Zip Code 94030	Purpose of Disbursement Lodging 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) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Westin Hotel		Transaction ID: SB21B.4494.25 Date of Disbursement
Mailing Address 1 Old Bayshore Hwy		<input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Millbrae	State CA	Zip Code 94030
Purpose of Disbursement Lodging	<input type="text" value="002"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Westin Hotel		Transaction ID: SB21B.4494.26 Date of Disbursement
Mailing Address 1 Old Bayshore Hwy		<input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Millbrae	State CA	Zip Code 94030
Purpose of Disbursement Lodging	<input type="text" value="002"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Pritt Factory Furniture		Transaction ID: SB21B.4494.28 Date of Disbursement
Mailing Address 1060 Mine 40		<input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Windber	State PA	Zip Code 15963
Purpose of Disbursement Office Expense	<input type="text" value="001"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. First Commonwealth Bank		Transaction ID: SB21B.4460 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address Franklin Street Office 217 Franklin St		Amount of Each Disbursement this Period 190.80
City Johnstown State PA Zip Code 15901	Purpose of Disbursement Office Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) B. First Commonwealth Bank		Transaction ID: SB21B.4461 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address Franklin Street Office 217 Franklin St		Amount of Each Disbursement this Period 282.40
City Johnstown State PA Zip Code 15901	Purpose of Disbursement Credit Card Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) C. First Commonwealth Bank		Transaction ID: SB21B.4459 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Franklin Street Office 217 Franklin St		Amount of Each Disbursement this Period 31.74
City Johnstown State PA Zip Code 15901	Purpose of Disbursement Office Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	504.94
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. First Commonwealth Bank		Transaction ID: SB21B.4569 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address Franklin Street Office 217 Franklin St		Amount of Each Disbursement this Period 31.74
City Johnstown State PA Zip Code 15901	Purpose of Disbursement Office Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) B. First Commonwealth Bank		Transaction ID: SB21B.4570 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address Franklin Street Office 217 Franklin St		Amount of Each Disbursement this Period 125.98
City Johnstown State PA Zip Code 15901	Purpose of Disbursement Bank Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) C. First Commonwealth Bank		Transaction ID: SB21B.4571 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address Franklin Street Office 217 Franklin St		Amount of Each Disbursement this Period 25.50
City Johnstown State PA Zip Code 15901	Purpose of Disbursement Office Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	183.22
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

<input 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Susan O'Neill		Transaction ID: SB21B.4365 Date of Disbursement 08 / 07 / 2006	
Mailing Address 5910 Gloster Road		Amount of Each Disbursement this Period 10000.00	
City Bethesda State MD Zip Code 20816	Purpose of Disbursement Consulting	003 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Penn Air Inc		Transaction ID: SB21B.4477 Date of Disbursement 09 / 11 / 2006	
Mailing Address 3 Airport Drive		Amount of Each Disbursement this Period 2816.30	
City Martinsburg State PA Zip Code 16662	Purpose of Disbursement Travel	002 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Perkins Coie LLP		Transaction ID: SB21B.4446 Date of Disbursement 09 / 07 / 2006	
Mailing Address 1201 Third Avenue Suite 4800		Amount of Each Disbursement this Period 260.00	
City Seattle State WA Zip Code 98101-3099	Purpose of Disbursement Meeting Exp	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	13076.30
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 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Robert C. Ondick, CPA PC		Transaction ID: SB21B.4576 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 551 Main Street		Amount of Each Disbursement this Period 6115.00
City Johnstown State PA Zip Code 15901	Purpose of Disbursement Accounting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) B. Dorothy Rudzik		Transaction ID: SB21B.4373 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 2126 Connecticut Ave NW #41		Amount of Each Disbursement this Period 1850.00
City Washington State DC Zip Code 20008-1729	Purpose of Disbursement Office Exp & Fund Raiser Exp Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) C. Skyward Aviation		Transaction ID: SB21B.4573 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 6
Mailing Address 155 Airport Road		Amount of Each Disbursement this Period 25724.26
City Washington State PA Zip Code 15301	Purpose of Disbursement Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 002

SUBTOTAL of Disbursements This Page (optional) ▶	33689.26
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

<input 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Susan O'Neill & Associates		Transaction ID: SB21B.4369 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 5910 Gloster Road		Amount of Each Disbursement this Period 10628.70
City Bethesda State MD Zip Code 20816	Purpose of Disbursement See Detail Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 003

Full Name (Last, First, Middle Initial) B. Susan O'Neill & Associates		Transaction ID: SB21B.4369.0 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 5910 Gloster Road		Amount of Each Disbursement this Period 6558.44
City Bethesda State MD Zip Code 20816	Purpose of Disbursement Fund Raiser Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Susan O'Neill & Associates		Transaction ID: SB21B.4369.1 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 5910 Gloster Road		Amount of Each Disbursement this Period 4100.26
City Bethesda State MD Zip Code 20816	Purpose of Disbursement Consulting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	10628.70
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 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Susan O'Neill & Associates		Transaction ID: SB21B.4575 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 5910 Gloster Road		Amount of Each Disbursement this Period 7761.26
City Bethesda State MD Zip Code 20816	Purpose of Disbursement Fund Raising Expense 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) ▼
Purpose of Disbursement Fund Raising Expense Candidate Name		

Full Name (Last, First, Middle Initial) B. Vee Neal Aviation		Transaction ID: SB21B.4413 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address 200 Pleasant Unity Road Suite 109		Amount of Each Disbursement this Period 8870.73
City Latrobe State PA Zip Code 15650	Purpose of Disbursement Travel 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) ▼
Purpose of Disbursement Travel Candidate Name		

Full Name (Last, First, Middle Initial) C. Vee Neal Aviation		Transaction ID: SB21B.4470 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address 200 Pleasant Unity Road Suite 109		Amount of Each Disbursement this Period 4276.80
City Latrobe State PA Zip Code 15650	Purpose of Disbursement Travel 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) ▼
Purpose of Disbursement Travel Candidate Name		

SUBTOTAL of Disbursements This Page (optional) ▶	20908.79
TOTAL This Period (last page this line number only) ▶	100461.49

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. ABERCROMBIE FOR CONGRESS		Transaction ID: SB23.4479 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address c/o 1357 Kapiolani Blvd. Ste. 1005 c/o 1357 Kapiolani Blvd. Ste. 1005		Amount of Each Disbursement this Period 2000.00
City Honolulu State HI Zip Code 96814	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) B. ALTMIRE, JASON		Transaction ID: SB23.4425 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6
Mailing Address 8190 STREAMSIDE DRIVE		Amount of Each Disbursement this Period 2000.00
City PITTSBURGH State PA Zip Code 15237	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) C. ARCURI FOR CONGRESS		Transaction ID: SB23.4421 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6
Mailing Address P.O. Box 8508		Amount of Each Disbursement this Period 2000.00
City Utica State NY Zip Code 13505	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. BETTY SUTTON FOR CONGRESS		Transaction ID: SB23.4418 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 1700 W MARKET ST #155		Amount of Each Disbursement this Period 2000.00
City AKRON State OH Zip Code 44313	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. BOSWELL FOR CONGRESS		Transaction ID: SB23.4345 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 6220		Amount of Each Disbursement this Period 2000.00
City Des Moines State IA Zip Code 50309	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Brown for Congress		Transaction ID: SB23.4561 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address P. O. Box 4506		Amount of Each Disbursement this Period 2000.00
City Auburn State CA Zip Code 95604	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. CARNEY FOR CONGRESS		Transaction ID: SB23.4337 Date of Disbursement 08 / 01 / 2006
Mailing Address PO Box 38		Amount of Each Disbursement this Period 2000.00
City Dimock State PA Zip Code 18816	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CLARKE FOR CONGRESS		Transaction ID: SB23.4434 Date of Disbursement 09 / 07 / 2006
Mailing Address 111-36 200TH STREET		Amount of Each Disbursement this Period 2000.00
City HOLLIS State NY Zip Code 11412	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 11	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CLARKE FOR CONGRESS		Transaction ID: SB23.4483 Date of Disbursement 09 / 13 / 2006
Mailing Address 111-36 200TH STREET		Amount of Each Disbursement this Period 2000.00
City HOLLIS State NY Zip Code 11412	Purpose of Disbursement Contributio Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. COLEEN ROWLEY FOR CONGRESS		Transaction ID: SB23.4436 Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2006
Mailing Address P.O. Box 241598		Amount of Each Disbursement this Period 2000.00
City Apple Valley State MN Zip Code 55124	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. COMMITTEE TO BRING BACK BARON		Transaction ID: SB23.4473 Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2006
Mailing Address PO BOX 1071		Amount of Each Disbursement this Period 2000.00
City SEYMOUR State IN Zip Code 47274	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT CHRIS MURPHY		Transaction ID: SB23.4381 Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2006
Mailing Address P.O. Box 127		Amount of Each Disbursement this Period 2000.00
City Cheshire State CT Zip Code 06410	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. COURTNEY FOR CONGRESS		Transaction ID: SB23.4378 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address 38 Risley Road		Amount of Each Disbursement this Period 2000.00	
City Vernon	State CT	Zip Code 06066	011 Category/ Type
Purpose of Disbursement Contribution		Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 02			

Full Name (Last, First, Middle Initial) B. CRANLEY FOR CONGRESS		Transaction ID: SB23.4349 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6	
Mailing Address 37 W 7TH ST SUITE 804		Amount of Each Disbursement this Period 2000.00	
City CINCINNATI	State OH	Zip Code 45202	011 Category/ Type
Purpose of Disbursement Contribution		Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 01			

Full Name (Last, First, Middle Initial) C. DEFAZIO FOR CONGRESS		Transaction ID: SB23.4484 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6	
Mailing Address PO Box 1316		Amount of Each Disbursement this Period 2000.00	
City Springfield	State OR	Zip Code 97477	011 Category/ Type
Purpose of Disbursement Contribution		Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OR District: 04			

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. ELLSWORTH FOR CONGRESS COMMITTEE		Transaction ID: SB23.4342 Date of Disbursement																				
Mailing Address PO BOX 62		<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>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	3		2	0	0	6													
City EVANSVILLE	State IN	Zip Code 47708																				
Purpose of Disbursement Contribution		<table border="1"><tr><td>011</td></tr><tr><td>Category/ Type</td></tr></table>	011	Category/ Type																		
011																						
Category/ Type																						
Candidate Name																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: IN	District: 08																					

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial) B. ELLSWORTH FOR CONGRESS COMMITTEE		Transaction ID: SB23.4376 Date of Disbursement																				
Mailing Address PO BOX 62		<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>8</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	6		2	0	0	6													
City EVANSVILLE	State IN	Zip Code 47708																				
Purpose of Disbursement Contribution		<table border="1"><tr><td>011</td></tr><tr><td>Category/ Type</td></tr></table>	011	Category/ Type																		
011																						
Category/ Type																						
Candidate Name																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: IN	District: 08																					

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial) C. ERLANDSON FOR U S REPRESENTATIVE		Transaction ID: SB23.4415 Date of Disbursement																				
Mailing Address PO BOX 14805		<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>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	8		2	0	0	6													
City MINNEAPOLIS	State MN	Zip Code 55414																				
Purpose of Disbursement Contribution		<table border="1"><tr><td>011</td></tr><tr><td>Category/ Type</td></tr></table>	011	Category/ Type																		
011																						
Category/ Type																						
Candidate Name																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: MN	District: 05																					

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>4000.00</td></tr></table>	4000.00
4000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. ERLANDSON FOR U S REPRESENTATIVE		Transaction ID: SB23.4417 Date of Disbursement
Mailing Address PO BOX 14805		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>
City MINNEAPOLIS	State MN	Zip Code 55414
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 05		
		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>

Full Name (Last, First, Middle Initial) B. FARRELL FOR CONGRESS		Transaction ID: SB23.4380 Date of Disbursement
Mailing Address P.O. Box 5136		<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>
City Westport	State CT	Zip Code 06881
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		
		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>

Full Name (Last, First, Middle Initial) C. FRIENDS OF CHARLIE WILSON		Transaction ID: SB23.4335 Date of Disbursement
Mailing Address 7 CADIZ PIKE		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City BRIDGEPORT	State OH	Zip Code 43912
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 06		
		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. FRIENDS OF JOE BACA		Transaction ID: SB23.4496 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 2000.00
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 43	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

Full Name (Last, First, Middle Initial) B. FRIENDS OF MAZIE HIRONO		Transaction ID: SB23.4579 Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2006
Mailing Address PO BOX 677		Amount of Each Disbursement this Period 2000.00
City HONOLULU State HI Zip Code 96809	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

Full Name (Last, First, Middle Initial) C. FRIENDS OF TAMMY DUCKWORTH		Transaction ID: SB23.4475 Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2006
Mailing Address 416 W. 22nd St.		Amount of Each Disbursement this Period 2000.00
City Lombard State IL Zip Code 60148	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) ▼	011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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(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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. GIFFORDS FOR CONGRESS		Transaction ID: SB23.4554 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2006
Mailing Address PO Box 27565		Amount of Each Disbursement this Period 2000.00
City Tucson State AZ Zip Code 85726	Purpose of Disbursement Contribution Candidate Name 011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. GIFFORDS FOR CONGRESS		Transaction ID: SB23.4558 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2006
Mailing Address PO Box 27565		Amount of Each Disbursement this Period 2000.00
City Tucson State AZ Zip Code 85726	Purpose of Disbursement Contrib, Retire Debt Candidate Name 011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. GOLDMARK FOR CONGRESS		Transaction ID: SB23.4486 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2006
Mailing Address 400 TIMENTWA ROAD		Amount of Each Disbursement this Period 2000.00
City OKANOGAN State WA Zip Code 98840	Purpose of Disbursement Contribution Candidate Name 011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. GOLDMARK FOR CONGRESS		Transaction ID: SB23.4488 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 400 TIMENTWA ROAD		Amount of Each Disbursement this Period 2000.00
City OKANOGAN State WA Zip Code 98840	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. HARRY MITCHELL FOR CONGRESS		Transaction ID: SB23.4347 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO BOX 23748		Amount of Each Disbursement this Period 2000.00
City TEMPE State AZ Zip Code 85285	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JAY FAWCETT FOR CONGRESS 2006		Transaction ID: SB23.4352 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 7124		Amount of Each Disbursement this Period 2000.00
City Colorado Springs State CO Zip Code 80933	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

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

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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. LAMPSON FOR CONGRESS		Transaction ID: SB23.4356 Date of Disbursement 08 / 03 / 2006
Mailing Address P.O. Box 58606		Amount of Each Disbursement this Period 2000.00
City Houston State TX Zip Code 77258	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) B. LOIS MURPHY FOR CONGRESS		Transaction ID: SB23.4427 Date of Disbursement 09 / 07 / 2006
Mailing Address P.O. BOX 312		Amount of Each Disbursement this Period 2000.00
City NARBERTH State PA Zip Code 19072	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) C. LUCAS FOR CONGRESS		Transaction ID: SB23.4432 Date of Disbursement 09 / 07 / 2006
Mailing Address PO BOX 175765		Amount of Each Disbursement this Period 2000.00
City COVINGTON State KY Zip Code 41017	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. MADRID FOR CONGRESS		Transaction ID: SB23.4556 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 2000.00
City Albuquerque State NM Zip Code 87125	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MASSA FOR CONGRESS		Transaction ID: SB23.4360 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 59 EAST MARKET STREET SUITE 244		Amount of Each Disbursement this Period 2000.00
City CORNING State NY Zip Code 14830	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. MASSA FOR CONGRESS		Transaction ID: SB23.4563 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address 59 EAST MARKET STREET SUITE 244		Amount of Each Disbursement this Period 2000.00
City CORNING State NY Zip Code 14830	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. MEJIAS FOR CONGRESS		Transaction ID: SB23.4442 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6
Mailing Address 124 SUNRISE DRIVE		Amount of Each Disbursement this Period 2000.00
City N MASSAPEQUA State NY Zip Code 11758	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mollohan for Congress		Transaction ID: SB23.4559 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 727 Mt. Vernon Avenue		Amount of Each Disbursement this Period 2000.00
City Fairmont State WV Zip Code 26554	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PATRICK MURPHY FOR CONGRESS		Transaction ID: SB23.4429 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6
Mailing Address PO BOX 868		Amount of Each Disbursement this Period 2000.00
City LEVITTOWN State PA Zip Code 19058	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. PERLMUTTER FOR CONGRESS		Transaction ID: SB23.4440
Mailing Address 3440 Youngfield St #264		Date of Disbursement 09 / 07 / 2006
City Wheat Ridge	State CO	Zip Code 80033
Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 2000.00	
Candidate Name	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO District: 07		

Full Name (Last, First, Middle Initial) B. PHYLLIS BUSANSKY FOR CONGRESS		Transaction ID: SB23.4423
Mailing Address 3611 SCHEFFLERA ROAD		Date of Disbursement 09 / 07 / 2006
City TAMPA	State FL	Zip Code 33618
Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 2000.00	
Candidate Name	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 09		

Full Name (Last, First, Middle Initial) C. TIM MAHONEY FOR FLORIDA		Transaction ID: SB23.4431
Mailing Address 1128-408 ROYAL PALM BEACH BLVD		Date of Disbursement 09 / 07 / 2006
City ROYAL PALM BEACH	State FL	Zip Code 33411
Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 2000.00	
Candidate Name	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 16		

SUBTOTAL of Disbursements This Page (optional)	6000.00
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)
MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
TIM WALZ FOR US CONGRESS

Mailing Address PO BOX 938

City MANKATO State MN Zip Code 56002

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 01

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.4438

Date of Disbursement

09 / 07 / 2006

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
WELCH FOR CONGRESS

Mailing Address PO Box 1086

City Montpelier State VT Zip Code 05601

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

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

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.4382

Date of Disbursement

08 / 16 / 2006

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
WINTER FOR CONGRESS COMMITTEE

Mailing Address 558 CASTLE PINES PKWY UNIT B4-409

City CASTLE ROCK State CO Zip Code 80108

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.4343

Date of Disbursement

08 / 03 / 2006

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. WULSIN FOR CONGRESS		Transaction ID: SB23.4358																					
Mailing Address 7440 Montgomery Road		Date of Disbursement																					
City Cincinnati State OH Zip Code 45236		<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>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	3		2	0	0	6														
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: center;">2000.00</td> </tr> </table>		2000.00																			
2000.00																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: OH District: 02		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
		011 Category/ Type																					

Full Name (Last, First, Middle Initial) B. ZACK SPACE FOR CONGRESS COMMITTEE		Transaction ID: SB23.4350																					
Mailing Address 714 N WOOSTER AVENUE		Date of Disbursement																					
City DOVER State OH Zip Code 44622		<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>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	3		2	0	0	6														
Purpose of Disbursement		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: center;">2000.00</td> </tr> </table>		2000.00																			
2000.00																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: OH District: 18		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
		011 Category/ Type																					

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	92000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Comm. to Re-Elect Ed Towns		Transaction ID: SB29.4390 Date of Disbursement																				
Mailing Address 438 Lewis Avenue		<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>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	3		2	0	0	6													
City Brooklyn	State NY	Zip Code 11233																				
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																			
2000.00																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		011 Category/ Type																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:	District:																					

Full Name (Last, First, Middle Initial) B. Comm. to Re Elect Gov Baldacci		Transaction ID: SB29.4490 Date of Disbursement																				
Mailing Address 225 Commercial Street Suite 401		<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>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	4		2	0	0	6													
City Portland	State ME	Zip Code 04101																				
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		011 Category/ Type																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:	District:																					

Full Name (Last, First, Middle Initial) C. Committee for His C - Bold Pac		Transaction ID: SB29.4567 Date of Disbursement																				
Mailing Address 1831 Bay Street SE		<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>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	9		2	0	0	6													
City WASHINGTON	State DC	Zip Code 20003																				
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																			
5000.00																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		011 Category/ Type																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:	District:																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>7500.00</td></tr></table>	7500.00
7500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAJORITY PAC

Full Name (Last, First, Middle Initial) A. Thurman for State House		Transaction ID: SB29.4367																					
Mailing Address 20159 SW 81th St		Date of Disbursement																					
City Dunnellon State FL Zip Code 34431		<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>8</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	8		2	0	0	6														
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00																			
500.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:		<table border="1"> <tr> <td>011</td> </tr> </table> Category/Type		011																			
011																							

Full Name (Last, First, Middle Initial) B. VETPAC INC		Transaction ID: SB29.4510																					
Mailing Address 202 SO FEDERAL HWY #2		Date of Disbursement																					
City LAKE WORTH State FL Zip Code 33460		<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>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	2		2	0	0	6														
Purpose of Disbursement Tickets		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td>5000.00</td> </tr> </table>		5000.00																			
5000.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:		<table border="1"> <tr> <td>011</td> </tr> </table> Category/Type		011																			
011																							

SUBTOTAL of Disbursements This Page (optional)	▶	5500.00
TOTAL This Period (last page this line number only)	▶	13000.00