



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Treasure State PAC

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		12037.55
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	20014.44									
(c) Total Receipts (from Line 19) .....	40500.00	93935.67								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	60514.44	105973.22								
7. Total Disbursements (from Line 31) .....	22578.66	68037.44								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	37935.78	37935.78								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Treasure State PAC

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	22500.00	54500.00
(i) Itemized (use Schedule A) .....	0.00	335.00
(ii) Unitemized .....	22500.00	54835.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	18000.00	36981.02
(c) Other Political Committees (such as PACs) .....	40500.00	91816.02
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	2119.65
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)) .....	40500.00	93935.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	40500.00	93935.67

**DETAILED SUMMARY PAGE**

of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17578.66	48037.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	17578.66	48037.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	20000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	22578.66	68037.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22578.66	68037.44

**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) .....	40500.00	91816.02
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40500.00	91816.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17578.66	48037.44
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	2119.65
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17578.66	45917.79

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

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

FOR LINE NUMBER: PAGE 6 / 18  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Treasure State PAC

**A.** Full Name (Last, First, Middle Initial)  
Emily B. Harris

Mailing Address 25 West 81st St, #4B

City State Zip Code  
New York NY 10024

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 8

**Transaction ID:** C4894649

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Maxine Isaacs

Mailing Address 2099 Pennsylvania Ave., Ste 900

City State Zip Code  
Washington DC 20006

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

Name of Employer Harvard University Occupation Adjunct Professor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 2 / 2 0 0 8

**Transaction ID:** C4893706

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Zak A. Anderson

Mailing Address 500 New Jersey Ave NW #550

City State Zip Code  
Washington DC 20001

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

Name of Employer BNSF Railway Occupation Government Affairs

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 5 / 2 0 0 8

**Transaction ID:** C4893704A

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution:  
See Below

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Treasure State PAC

**A.**

Full Name (Last, First, Middle Initial)  
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 8

Transaction ID: C4893704AB

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)  
Bartly Dzivi

Mailing Address 207 West Street

City State Zip Code  
Sausalito CA 94965

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

Name of Employer Occupation  
Dzivi Law Firm Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 8

Transaction ID: C4893703A

Amount of Each Receipt this Period

5000.00

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)  
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 8

Transaction ID: C4893703AB

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 18
	<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)  
Treasure State PAC

**A.**

Full Name (Last, First, Middle Initial) Wayne L. Rogers		Date of Receipt MM / DD / YYYY 05 / 15 / 2008
Mailing Address 191 Main St		<b>Transaction ID:</b> C4893702A
City Annapolis	State MD	Zip Code 21401
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 5000.00	
Name of Employer Synergics	Occupation President	* Earmarked Contribution: See Below
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) ActBlue		Date of Receipt MM / DD / YYYY 05 / 15 / 2008
Mailing Address P.O. Box 382110		<b>Transaction ID:</b> C4893702AB
City Cambridge	State MA	Zip Code 02238
FEC ID number of contributing federal political committee. <b>C</b> C00401224	Amount of Each Receipt this Period 5000.00	
Name of Employer	Occupation Conduit total listed in Agg. field	<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	22500.00

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

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

FOR LINE NUMBER: PAGE 9 / 18  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Treasure State PAC

**A.** Full Name (Last, First, Middle Initial)  
Aircraft Owners & Pilots Association PAC  
Mailing Address 421 Aviation Way  
City State Zip Code  
Frederick MD 21701  
FEC ID number of contributing federal political committee. **C** C00131185  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8  
Transaction ID: C4893705  
Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARAT  
Mailing Address 222 South Prospect Ave  
C/o Finance Department  
City State Zip Code  
Park Ridge IL 60068  
FEC ID number of contributing federal political committee. **C** C00173153  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 8  
Transaction ID: C4893709  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
American Bankers Association  
Mailing Address 1120 Connecticut Avenue NW  
City State Zip Code  
Washington DC 20036  
FEC ID number of contributing federal political committee. **C** C00004275  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 8  
Transaction ID: C4893708  
Amount of Each Receipt this Period 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 18  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Treasure State PAC

**A.** Full Name (Last, First, Middle Initial)  
EXPERIAN NORTH AMERICA INC. POLITICAL ACTION COMMI

Mailing Address 475 Anton Blvd

City State Zip Code  
Costa Mesa CA 92626

FEC ID number of contributing federal political committee. **C** C00379768

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2008

**Transaction ID:** C4893707

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE

Mailing Address 801 Pennsylvania Avenue  
Suite 720

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00033779

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2008

**Transaction ID:** C4892211

Amount of Each Receipt this Period  
1000.00

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

Mailing Address P.O. Box 222424

City State Zip Code  
Chantilly VA 20153

FEC ID number of contributing federal political committee. **C** C00381699

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2008

**Transaction ID:** C4894651

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) ..... ► **18000.00**

**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)  
Treasure State PAC

A.	Full Name (Last, First, Middle Initial) Auburn Quad, Inc.	Transaction ID: D297752 Date of Disbursement 05 / 15 / 2008
	Mailing Address PO Box 390728	Amount of Each Disbursement this Period 592.50
	City Cambridge State MA Zip Code 02139	
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Charlie Palmer Steak House	Transaction ID: D297762 Date of Disbursement 05 / 08 / 2008
	Mailing Address 101 Constitution Ave NW	Amount of Each Disbursement this Period 514.80
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement Catering for PAC - not for any fed candidates	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jon Tester	Transaction ID: D297761 Date of Disbursement 05 / 14 / 2008
	Mailing Address 709 Son Ln	Amount of Each Disbursement this Period 445.54
	City Big Sandy State MT Zip Code 59520-8443	
	Purpose of Disbursement Reimburse Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1552.84
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)  
Lori LaFave

Mailing Address 200 E. Jefferson St.

City Falls Church State VA Zip Code 22046

Purpose of Disbursement  
Fundraising Services for PAC - not fed candidates

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D297756  
Date of Disbursement

05 / 12 / 2008

Amount of Each Disbursement this Period

3500.00

B.

Full Name (Last, First, Middle Initial)  
Lori LaFave

Mailing Address 200 E. Jefferson St.

City Falls Church State VA Zip Code 22046

Purpose of Disbursement  
Fundraising Services for PAC - not fed candidates

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D297757  
Date of Disbursement

05 / 19 / 2008

Amount of Each Disbursement this Period

1750.00

C.

Full Name (Last, First, Middle Initial)  
NGP Software, Inc.

Mailing Address 1225 Eye St NW, Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D297753  
Date of Disbursement

05 / 12 / 2008

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional) ▶

5550.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 18

<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)  
Treasure State PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address 7500 Airline Drive</p> <p>City Minneapolis State MN Zip Code 55450</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298730</p> <p>Date of Disbursement 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 669.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address 7500 Airline Drive</p> <p>City Minneapolis State MN Zip Code 55450</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298731</p> <p>Date of Disbursement 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 598.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address 7500 Airline Drive</p> <p>City Minneapolis State MN Zip Code 55450</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298732</p> <p>Date of Disbursement 05 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1474.75</p>

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

2741.75

**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)  
Treasure State PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address 7500 Airline Drive</p> <p>City Minneapolis State MN Zip Code 55450</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298733</p> <p>Date of Disbursement 05 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 643.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) The Zamore Group</p> <p>Mailing Address PO Box 76187</p> <p>City Washington State DC Zip Code 20013</p> <p>Purpose of Disbursement Reimburse Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298728</p> <p>Date of Disbursement 05 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 42.80</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) The Zamore Group</p> <p>Mailing Address PO Box 76187</p> <p>City Washington State DC Zip Code 20013</p> <p>Purpose of Disbursement Compliance &amp; Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D297754</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>

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

**3185.80**

**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)  
Treasure State PAC

A.	Full Name (Last, First, Middle Initial) The Zamore Group	Transaction ID: D297755 Date of Disbursement 05 / 19 / 2008
	Mailing Address PO Box 76187	Amount of Each Disbursement this Period 2000.00
	City Washington State DC Zip Code 20013	
	Purpose of Disbursement Compliance & Accounting Services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) The Zamore Group	Transaction ID: D298738 Date of Disbursement 05 / 12 / 2008
	Mailing Address PO Box 76187	Amount of Each Disbursement this Period 1500.00
	City Washington State DC Zip Code 20013	
	Purpose of Disbursement Compliance & Accounting Services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: D298734 Date of Disbursement 05 / 21 / 2008
	Mailing Address PO Box 66100	Amount of Each Disbursement this Period 461.50
	City Chicago State IL Zip Code 60666	
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3961.50
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)  
Treasure State PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) US Postal Service</p> <p>Mailing Address 900 Brentwood Rd NE</p> <p>City Washington State DC Zip Code 20066</p> <p>Purpose of Disbursement BRM Permit Fee and Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D297763</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Stephanie Schriock</p> <p>Mailing Address 521 Clarke</p> <p>City Helena State MT Zip Code 59601</p> <p>Purpose of Disbursement Reimburse PAC Catering - not for fed candidates</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D297758</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="267.82"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) PS7's</p> <p>Mailing Address 777 Eye St NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Catering for PAC - not for federal candidates</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D297759</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="228.60"/></p> <p><b>[MEMO ITEM]</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="517.82"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="17509.71"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 18

<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)  
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)  
ALASKANS FOR BEGICH

Mailing Address PO BOX 240287

City ANCHORAGE State AK Zip Code 99524

Purpose of Disbursement  
In-kind to campaign - Travel

Candidate Name  
Mark Begich

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: AK District:

Transaction ID: D298737  
Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

1474.75

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Comm

Mailing Address 120 Maryland Ave, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name  
DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D298725  
Date of Disbursement

05 / 29 / 2008

Amount of Each Disbursement this Period

5000.00

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

5000.00

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

5000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Treasure State PAC

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Lori LaFave			Nature of Debt (Purpose): Fundraising Services
Mailing Address 200 E. Jefferson St.			
City Falls Church	State VA	ZIP Code 22046	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>		<b>Transaction ID: D280564</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> The Zamore Group			Nature of Debt (Purpose): Compliance & Accounting Services
Mailing Address PO Box 76187			
City Washington	State DC	ZIP Code 20013	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>		<b>Transaction ID: D280026</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> The Zamore Group			Nature of Debt (Purpose): Compliance & Accounting Services
Mailing Address PO Box 76187			
City Washington	State DC	ZIP Code 20013	

Outstanding Balance Beginning This Period <input type="text" value="2000.00"/>		<b>Transaction ID: D294472</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text" value="0.00"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="0.00"/>