

# 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  
BATTLE BORN POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO Box 40366  
 Check if different than previously reported. (ACC)  
Washington DC 20016

2. **FEC IDENTIFICATION NUMBER** C00364596  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 06 01 2007 through 06 30 2007

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

Type or Print Name of Treasurer Christopher J. Ward

Signature of Treasurer Electronically Filed by Christopher J. Ward Date 07 20 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
BATTLE BORN POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		85399.80
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	50136.36									
(c) Total Receipts (from Line 19) .....	54557.34	153057.34								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	104693.70	238457.14								
7. Total Disbursements (from Line 31) .....	72151.69	205915.13								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	32542.01	32542.01								
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  
BATTLE BORN POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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		
(i) Itemized (use Schedule A) .....	5000.00	17750.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	5000.00	17750.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	28000.00	113750.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	33000.00	131500.00
12. Transfers From Affiliated/Other Party Committees .....	21557.34	21557.34
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	54557.34	153057.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	54557.34	153057.34

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</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.....	24551.69	78315.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	24551.69	78315.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	47500.00	127500.00
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.....	100.00	100.00
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))..	72151.69	205915.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	72151.69	205915.13

**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) .....	33000.00	131500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	33000.00	131500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24551.69	78315.13
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24551.69	78315.13

**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 / 26
	<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	

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Sarah L. Berk

Mailing Address 1401 N Taft St Apt 122

City State Zip Code  
Arlington VA 22201

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

Name of Employer American Hospital Association  
Occupation Lobbyist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 22 / 2007

Transaction ID: SA11A1.5198

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Aaron K. Cohen

Mailing Address 1007 W Braddock Rd

City State Zip Code  
Alexandria VA 22302

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

Name of Employer Kimbell & Associates  
Occupation Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 15 / 2007

Transaction ID: SA11A1.5206

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Richard B. Murphy

Mailing Address 6041 Woodmont Rd

City State Zip Code  
Alexandria VA 22307

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

Name of Employer Murphy & Associates  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 15 / 2007

Transaction ID: SA11A1.5204

Amount of Each Receipt this Period  
2500.00

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

**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 7 / 26
	<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	

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. AMERICAN COLLEGE OF CARDIOLOGY POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 9111 Old Georgetown Road		<b>Transaction ID: SA11C.5196</b>
City State Zip Code Bethesda MD 20814	FEC ID number of contributing federal political committee. <b>C</b> C00375360	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) <b>B. American Gaming Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 555 13th Street Suite 1010E		<b>Transaction ID: SA11C.5194</b>
City State Zip Code Washington DC 20004	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2000.00
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) <b>C. AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 10801 Rockville Pike		<b>Transaction ID: SA11C.5191</b>
City State Zip Code Rockville MD 20852	FEC ID number of contributing federal political committee. <b>C</b> C00210666	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	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 26
	<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	

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)  
**BATTLE BORN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA CORPORATION POLITICAL ACTION COMMITTEE OF FLORIDA</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address <b>600 PEACHTREE ST STE 1500 PO BOX 40789</b>		<b>Transaction ID: SA11C.5187</b>
City <b>ATLANTA</b> State <b>GA</b> Zip Code <b>30308</b>	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C C00094656</b>		
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	

Full Name (Last, First, Middle Initial) <b>B. Blue Cross Blue Shield Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address <b>1310 G Street NW 12th Floor</b>		<b>Transaction ID: SA11C.5197</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20005</b>	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
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	

Full Name (Last, First, Middle Initial) <b>C. FEDERAL EXPRESS POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address <b>942 South Shady Grove Road</b>		<b>Transaction ID: SA11C.5193</b>
City <b>Memphis</b> State <b>TN</b> Zip Code <b>38120</b>	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C C00068692</b>		
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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	14000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 26
	<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	

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. General Atomics PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address PO Box 22930		<b>Transaction ID: SA11C.5189</b>	
City State Zip Code San Diego CA 92122		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			
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) <b>B. INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 412 First Street SE Suite 300		<b>Transaction ID: SA11C.5195</b>	
City State Zip Code Washington DC 20003		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00022343			
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>C. ZENECA INC. POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 7	
Mailing Address c/o Zeneca Inc. 1800 Concord Pike PO Box 15437		<b>Transaction ID: SA11C.5190</b>	
City State Zip Code Wilmington DE 19850		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00279455			
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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	28000.00

**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 10 / 26
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)  
**BATTLE BORN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Timothy Cashman</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7	
Mailing Address 2300 W Sahara		Transaction ID: SA12.5209	
City State Zip Code Las Vegas NV 89102	Amount of Each Receipt this Period 1666.67		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer Occupation Cashman Cadillac Owner	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. R.P. Ellis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 979 Camelia Dr		Transaction ID: SA12.5211	
City State Zip Code Henderson NV 89015	Amount of Each Receipt this Period 833.33		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer Occupation B&E Auto Auction President/CEO	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mike Ensign</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 7	
Mailing Address 16 Burning Tree Ct.		Transaction ID: SA12.5212	
City State Zip Code Las Vegas NV 89113	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 26
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)  
**BATTLE BORN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Sharon Ensign</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2007	
Mailing Address 16 Burning Tree Ct.		<b>Transaction ID: SA12.5213</b>	
City State Zip Code Las Vegas NV 89113	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Hazen C. Marshall</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2007	
Mailing Address 7852 Midday Ln		<b>Transaction ID: SA12.5214</b>	
City State Zip Code Alexandria VA 22306	Amount of Each Receipt this Period 833.34		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer The Nickels Group Occupation Partner	Aggregate Year-to-Date .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. Oracle Corporation PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2007	
Mailing Address 500 Oracle Parkway MS 50P6		<b>Transaction ID: SA12.5216</b>	
City State Zip Code Redwood Shores CA 94065	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer Occupation	Aggregate Year-to-Date .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 26
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)  
**BATTLE BORN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Sig Rogich</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address <b>3980 Howard Hughes Parkway Suite 550</b>		Transaction ID: SA12.5217
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89109</b>
Amount of Each Receipt this Period 833.33		[MEMO ITEM]
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ .00	

Full Name (Last, First, Middle Initial) <b>B. SENATE MAJORITY COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address <b>PO Box 40177</b>		Transaction ID: SA12.5208
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20016</b>
Amount of Each Receipt this Period 21557.34		Transfer from Affiliated Committee
FEC ID number of contributing federal political committee. <b>C C00396226</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 21557.34	

Full Name (Last, First, Middle Initial) <b>C. SIERRA PACIFIC EMPLOYEES POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address <b>P.O. Box 81500</b>		Transaction ID: SA12.5218
City <b>LAS VEGAS</b>	State <b>NV</b>	Zip Code <b>89180</b>
Amount of Each Receipt this Period 833.33		[MEMO ITEM]
FEC ID number of contributing federal political committee. <b>C C00153379</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	21557.34
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 26
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)  
**BATTLE BORN POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Station Casinos, Inc. PAC

Mailing Address **2411 W. Sahara Avenue**

City **Las Vegas** State **NV** Zip Code **89102**

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**05 / 31 / 2007**

**Transaction ID: SA12.5219**

Amount of Each Receipt this Period  
**5000.00**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
 US CHAMBER OF COMMERCE PAC (NCAP)

Mailing Address **1615 H Street NW**

City **Washington** State **DC** Zip Code **20062**

FEC ID number of contributing federal political committee. **C C00082040**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 13 / 2007**

**Transaction ID: SA12.5220**

Amount of Each Receipt this Period  
**1000.00**

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>21557.34</b>

# 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 14 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Capitol Catering</b>		Transaction ID: SB21B.5147 Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2007
Mailing Address 2316 Jefferson Davis Hwy		Amount of Each Disbursement this Period 3822.43
City Alexandria State VA Zip Code 22301	Category/Type	
Purpose of Disbursement Catering Costs		
Candidate Name		<b>[MEMO ITEM]</b>
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>B. Erin Casey</b>		Transaction ID: SB21B.5136 Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2007
Mailing Address 514 G St, SE		Amount of Each Disbursement this Period 1297.19
City Washington State DC Zip Code 20003	Category/Type	
Purpose of Disbursement Travel Reimbursement		
Candidate Name		<b>[MEMO ITEM]</b>
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>C. Erin Casey</b>		Transaction ID: SB21B.5146 Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2007
Mailing Address 514 G St, SE		Amount of Each Disbursement this Period 3822.43
City Washington State DC Zip Code 20003	Category/Type	
Purpose of Disbursement Catering Costs (see memo)		
Candidate Name		<b>[MEMO ITEM]</b>
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) ..... ▶	5119.62
<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)

PAGE 15 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Erin Casey</b>		<b>Transaction ID:</b> SB21B.5174 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 514 G St, SE		Amount of Each Disbursement this Period 1139.62
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Payroll		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Erin Casey</b>		<b>Transaction ID:</b> SB21B.5175 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 514 G St, SE		Amount of Each Disbursement this Period 1139.62
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Payroll		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Chase Card Services</b>		<b>Transaction ID:</b> SB21B.5154 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address P.O. Box 9001074		Amount of Each Disbursement this Period 3010.49
City Louisville State KY Zip Code 40290	Category/ Type	
Purpose of Disbursement Credit Card (see memos)		
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) ..... ▶	<b>5289.73</b>
<b>TOTAL</b> 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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Cingular Wireless</b>		<b>Transaction ID:</b> SB21B.5137 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 299.25
City Atlanta State GA Zip Code 30353	Purpose of Disbursement Phone 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

Full Name (Last, First, Middle Initial) <b>B. Cingular Wireless</b>		<b>Transaction ID:</b> SB21B.5152 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 144.76
City Atlanta State GA Zip Code 30353	Purpose of Disbursement Phone Service 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

Full Name (Last, First, Middle Initial) <b>C. Cingular Wireless</b>		<b>Transaction ID:</b> SB21B.5171 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 304.92
City Atlanta State GA Zip Code 30353	Purpose of Disbursement Phone Service 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	748.93
<b>TOTAL</b> 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)

PAGE 17 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		<b>Transaction ID:</b> SB21B.5150 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 100.33
City Pasadena State CA Zip Code 91109	Purpose of Disbursement Delivery Services	
Candidate Name		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>B. Federal Express</b>		<b>Transaction ID:</b> SB21B.5169 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 2138.00
City Pasadena State CA Zip Code 91109	Purpose of Disbursement Travel - Airfare	
Candidate Name		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>C. Cynthia Hampton</b>		<b>Transaction ID:</b> SB21B.5178 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 2004 Slow Wind St		Amount of Each Disbursement this Period 692.62
City Las Vegas State NV Zip Code 89134	Purpose of Disbursement Payroll	
Candidate Name		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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2930.95
<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)

PAGE 18 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Cynthia Hampton</b>		<b>Transaction ID: SB21B.5179</b> Date of Disbursement MM / DD / YYYY 06 / 29 / 2007	
Mailing Address 2004 Slow Wind St		Amount of Each Disbursement this Period 692.62	
City Las Vegas State NV Zip Code 89134	Purpose of Disbursement Payroll	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>B. Lounge 21</b>		<b>Transaction ID: SB21B.5225</b> Date of Disbursement MM / DD / YYYY 06 / 06 / 2007	
Mailing Address 2033 M St NW		Amount of Each Disbursement this Period 672.01	
City Washington State DC Zip Code 20036	Purpose of Disbursement Catering Costs - 1 Transaction	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>C. Paychex</b>		<b>Transaction ID: SB21B.5180</b> Date of Disbursement MM / DD / YYYY 06 / 15 / 2007	
Mailing Address 3060 Williams Dr #200		Amount of Each Disbursement this Period 810.28	
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes	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]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1502.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[MEMO ITEM]

# 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 19 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		<b>Transaction ID:</b> SB21B.5181 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 3060 Williams Dr #200		Amount of Each Disbursement this Period 810.28
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes 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

Full Name (Last, First, Middle Initial) <b>B. Political Compliance Services</b>		<b>Transaction ID:</b> SB21B.5153 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address PO Box 373		Amount of Each Disbursement this Period 500.00
City Fairfax Station State VA Zip Code 22039	Purpose of Disbursement Compliance and Database 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

Full Name (Last, First, Middle Initial) <b>C. Spalding Group</b>		<b>Transaction ID:</b> SB21B.5151 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address 2306 Frankfort Ave		Amount of Each Disbursement this Period 6250.00
City Louisville State KY Zip Code 40206	Purpose of Disbursement Website Development 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7560.28
<b>TOTAL</b> 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)

PAGE 20 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Splendid Fare</b>		Transaction ID: SB21B.5223 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address 1310 Braddock PI		Amount of Each Disbursement this Period 2204.60  <b>[MEMO ITEM]</b>
City Alexandria State VA Zip Code 22314		
Purpose of Disbursement Catering Costs - 1 Transaction	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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Michael A. Stakias</b>		Transaction ID: SB21B.5176 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 1733 N Queens Ln #121		Amount of Each Disbursement this Period 607.66
City Arlington State VA Zip Code 22201		
Purpose of Disbursement Payroll	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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Michael A. Stakias</b>		Transaction ID: SB21B.5177 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 1733 N Queens Ln #121		Amount of Each Disbursement this Period 607.66
City Arlington State VA Zip Code 22201		
Purpose of Disbursement Payroll	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) ..... ▶	1215.32
<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)

PAGE 21 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. Verizon Wireless**

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement  
Phone Service

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.5149

Date of Disbursement  
06 / 13 / 2007

Amount of Each Disbursement this Period  
183.96

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	183.96
<b>TOTAL</b> This Period (last page this line number only) .....	▶	24551.69

**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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BOB SCHAFFER FOR US SENATE</b>		<b>Transaction ID: SB23.5166</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 1777 HARRISON ST SUITE 100		Amount of Each Disbursement this Period 5000.00
City DENVER State CO Zip Code 80210		
Purpose of Disbursement <input type="checkbox"/> Category/Type		
Candidate Name BOB SCHAFFER FOR US SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB SCHAFFER FOR US SENATE</b>		<b>Transaction ID: SB23.5167</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 1777 HARRISON ST SUITE 100		Amount of Each Disbursement this Period 5000.00
City DENVER State CO Zip Code 80210		
Purpose of Disbursement <input type="checkbox"/> Category/Type		
Candidate Name BOB SCHAFFER FOR US SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CHAMBLISS FOR SENATE</b>		<b>Transaction ID: SB23.5159</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address POST OFFICE BOX 12469		Amount of Each Disbursement this Period 2500.00
City ATLANTA State GA Zip Code 30355		
Purpose of Disbursement <input type="checkbox"/> Category/Type		
Candidate Name CHAMBLISS FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<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)

PAGE 23 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHAMBLISS FOR SENATE</b>		Transaction ID: SB23.5160 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address POST OFFICE BOX 12469		Amount of Each Disbursement this Period 5000.00
City ATLANTA State GA Zip Code 30355	Category/ Type	
Purpose of Disbursement		
Candidate Name CHAMBLISS FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JIM INHOFE COMMITTEE</b>		Transaction ID: SB23.5164 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address PO BOX 13300		Amount of Each Disbursement this Period 2500.00
City OKLAHOMA CITY State OK Zip Code 73113	Category/ Type	
Purpose of Disbursement		
Candidate Name FRIENDS OF JIM INHOFE COMMITTEE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JIM INHOFE COMMITTEE</b>		Transaction ID: SB23.5165 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address PO BOX 13300		Amount of Each Disbursement this Period 5000.00
City OKLAHOMA CITY State OK Zip Code 73113	Category/ Type	
Purpose of Disbursement		
Candidate Name FRIENDS OF JIM INHOFE COMMITTEE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<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)

PAGE 24 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SESSIONS SENATE COMMITTEE</b>		Transaction ID: SB23.5162 Date of Disbursement																				
Mailing Address P O BOX 4278		<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>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	2		2	0	7														
City MONTGOMERY	State AL	Zip Code 36103																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
Candidate Name FRIENDS OF SESSIONS SENATE COMMITTEE		<table border="1"><tr><td colspan="10">2500.00</td></tr></table>	2500.00																			
2500.00																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: AL	District: 00																					

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SESSIONS SENATE COMMITTEE</b>		Transaction ID: SB23.5163 Date of Disbursement																				
Mailing Address P O BOX 4278		<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>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	2		2	0	7														
City MONTGOMERY	State AL	Zip Code 36103																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
Candidate Name FRIENDS OF SESSIONS SENATE COMMITTEE		<table border="1"><tr><td colspan="10">5000.00</td></tr></table>	5000.00																			
5000.00																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: AL	District: 00																					

Full Name (Last, First, Middle Initial) <b>C. PAT ROBERTS FOR SENATE</b>		Transaction ID: SB23.5157 Date of Disbursement																				
Mailing Address PO BOX 433		<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>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	2		2	0	7														
City GREAT BEND	State KS	Zip Code 67530																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
Candidate Name PAT ROBERTS FOR SENATE		<table border="1"><tr><td colspan="10">2500.00</td></tr></table>	2500.00																			
2500.00																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: KS	District: 00																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td colspan="10">10000.00</td></tr></table>	10000.00									
10000.00											
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td colspan="10"> </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)

PAGE 25 / 26

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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PAT ROBERTS FOR SENATE</b>		Transaction ID: SB23.5158 Date of Disbursement 06 / 22 / 2007
Mailing Address PO BOX 433		Amount of Each Disbursement this Period 5000.00
City GREAT BEND	State KS Zip Code 67530	
Purpose of Disbursement		
Candidate Name PAT ROBERTS FOR SENATE		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS District: 00		

Full Name (Last, First, Middle Initial) <b>B. PEOPLE FOR PETE DOMENICI</b>		Transaction ID: SB23.5155 Date of Disbursement 06 / 22 / 2007
Mailing Address POST OFFICE BOX 93656		Amount of Each Disbursement this Period 2500.00
City ALBUQUERQUE	State NM Zip Code 87199	
Purpose of Disbursement		
Candidate Name PEOPLE FOR PETE DOMENICI		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM District: 00		

Full Name (Last, First, Middle Initial) <b>C. PEOPLE FOR PETE DOMENICI</b>		Transaction ID: SB23.5156 Date of Disbursement 06 / 22 / 2007
Mailing Address POST OFFICE BOX 93656		Amount of Each Disbursement this Period 5000.00
City ALBUQUERQUE	State NM Zip Code 87199	
Purpose of Disbursement		
Candidate Name PEOPLE FOR PETE DOMENICI		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	47500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 26

<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

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)  
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)  
**A.** Special Olympics of Wyoming

Mailing Address 350 West A St, Ste 101

City Casper State WY Zip Code 82601

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.5144

Date of Disbursement

<sup>M</sup> 0	<sup>M</sup> 6	/	<sup>D</sup> 0	<sup>D</sup> 8	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 7
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Amount of Each Disbursement this Period

100.00
--------

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

100.00

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

100.00