

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
National Marine Manufacturers Association Political Action Committee

ADDRESS (number and street) 444 North Capitol Street, N.W.
Suite 645
 Check if different than previously reported. (ACC)
Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** C00245548
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 11 28 2006 through 12 31 2006

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

Type or Print Name of Treasurer Ms. Monita Fontaine

Signature of Treasurer Electronically Filed by Ms. Monita Fontaine Date 01 24 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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
National Marine Manufacturers Association Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		89691.76
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	57319.87									
(c) Total Receipts (from Line 19)	4896.41	199149.15								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	62216.28	288840.91								
7. Total Disbursements (from Line 31)	9000.00	235624.63								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	53216.28	53216.28								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
National Marine Manufacturers Association Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4486.37	175151.22
(i) Itemized (use Schedule A)	410.04	18997.93
(ii) Unitemized	4896.41	194149.15
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	5000.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	4896.41	199149.15
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	4896.41	199149.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4896.41	199149.15

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	235624.63
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))..	9000.00	235624.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	9000.00	235624.63

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	4896.41	199149.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4896.41	199149.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

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

NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Steve Lochmueller		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address 200 Summerset Blvd		Transaction ID: 25070497
City State Zip Code Somerset KY 42501-3159	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Summerset Acquisition, LLC	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Mr. Todd Sullivan		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 6
Mailing Address 20792 N. River Ridge		Transaction ID: 25164454
City State Zip Code Bristol IN 46507-8520	Amount of Each Receipt this Period 550.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Jet Technologies	Occupation President/Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Mr. Joseph Lyshon		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6
Mailing Address 3207 Industrial 29th Street		Transaction ID: 25164488
City State Zip Code Ft. Pierce FL 34946-8642	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Maverick Boat Co., Inc.	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	2060.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Tom Menne		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 6
Mailing Address 26612 Fallbrook Ave. P.O. Box 509		Transaction ID: 25195739
City State Zip Code Wyoming MN 55092-9066	Amount of Each Receipt this Period 600.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Premier Marine, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1530.00	

Full Name (Last, First, Middle Initial) B. Mr. David Nirenberg		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1493 Railhead Blvd.		Transaction ID: 25229538
City State Zip Code Naples FL 34110-8444	Amount of Each Receipt this Period 535.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unified Marine	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 535.00	

Full Name (Last, First, Middle Initial) C. Mr. Stephen Evans		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 452 Kennedy Place		Transaction ID: PR1103780115765
City State Zip Code Vernon Hills IL 60061-1042	Amount of Each Receipt this Period 187.50	
FEC ID number of contributing federal political committee. C		
Name of Employer NMMA - National Marine Manufacturers A	Occupation Director of Meeting Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1322.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. John McKnight		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1103841515765	
Mailing Address 1819 L Street, NW Suite 700		Amount of Each Receipt this Period 75.00	
City Washington State DC Zip Code 20036-3852	FEC ID number of contributing federal political committee. C		
Name of Employer NMMA Occupation Director, Environment & Sfty Compliance	Aggregate Year-to-Date 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	P/R Deduction (\$25.00 Semi-Monthly)		

B. Full Name (Last, First, Middle Initial) Mr. Michael Duffy		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1103859415765	
Mailing Address 148 West 37th Str, 11th Floor		Amount of Each Receipt this Period 90.00	
City New York State NY Zip Code 10018-6909	FEC ID number of contributing federal political committee. C		
Name of Employer NMMA Occupation Director, Meeting Services	Aggregate Year-to-Date 720.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	P/R Deduction (\$30.00 Semi-Monthly)		

C. Full Name (Last, First, Middle Initial) Ms. Cathy Johnston		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1103865915765	
Mailing Address 1815 NW 77th Avenue		Amount of Each Receipt this Period 75.00	
City Pembroke Pines State FL Zip Code 33024-0918	FEC ID number of contributing federal political committee. C		
Name of Employer NMMA Occupation Vice President	Aggregate Year-to-Date 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	P/R Deduction (\$25.00 Semi-Monthly)		

SUBTOTAL of Receipts This Page (optional)	240.00
TOTAL This Period (last page this line number only)	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Ben Wold		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1103892215765	
Mailing Address 200 East Randolph Drive Suite 5100		Amount of Each Receipt this Period 66.87	
City Chicago State IL Zip Code 60601-6436	FEC ID number of contributing federal political committee. C		
Name of Employer NMMA Occupation Executive Vice President	Aggregate Year-to-Date ▼ 534.96		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$22.29 Semi-Monthly)		

B. Full Name (Last, First, Middle Initial) Mr. Thomas Marhevko		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1103892415765	
Mailing Address 138 Elgin Avenue Suite 5100		Amount of Each Receipt this Period 90.00	
City Forest Park State IL Zip Code 60130-1342	FEC ID number of contributing federal political committee. C		
Name of Employer NMMA Occupation Director, Technical Services	Aggregate Year-to-Date ▼ 720.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$30.00 Semi-Monthly)		

C. Full Name (Last, First, Middle Initial) Ms. Kim Muncy		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1197304215765	
Mailing Address 12019 Lavenia Lane		Amount of Each Receipt this Period 30.00	
City Louisville State KY Zip Code 40272-6101	FEC ID number of contributing federal political committee. C		
Name of Employer NMMA - National Marine Manufacturers A Occupation Show Manager	Aggregate Year-to-Date ▼ 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$10.00 Semi-Monthly)		

SUBTOTAL of Receipts This Page (optional) ▶	186.87
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. David Dickerson

Mailing Address 444 North Capitol Street, NW, Ste

City Washington State DC Zip Code 20001-1559

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

Name of Employer NMMA Occupation State Government Relations Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Transaction ID: PR1241859615765

Amount of Each Receipt this Period

								30.00
--	--	--	--	--	--	--	--	-------

P/R Deduction (\$10.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
Mr. Joseph Lyshon

Mailing Address 3207 Industrial 29th Street

City Ft. Pierce State FL Zip Code 34946-8642

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

Name of Employer Maverick Boat Co., Inc. Occupation Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Transaction ID: PR1397094215765

Amount of Each Receipt this Period

								10.00
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P/R Deduction (\$10.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Ms. Cindy Squires

Mailing Address 13170 Kidwell Field Road

City Herndon State VA Zip Code 20171-4317

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

Name of Employer NMMA - Government Relations Office Occupation Regulatory Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Transaction ID: PR1554487215765

Amount of Each Receipt this Period

								60.00
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P/R Deduction (\$20.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Nick Tindall Mailing Address 941 Isaac Chaney City Odenton State MD Zip Code 21113-3772 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1602439815765 Amount of Each Receipt this Period 30.00 P/R Deduction (\$10.00 Semi-Monthly)
Name of Employer: NMMA - Government Relations Office Occupation: PAC Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		

B. Full Name (Last, First, Middle Initial) Mr. Carl Blackwell Mailing Address 2838 N. Cambridge #1 City Chicago State IL Zip Code 60657-6019 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1604414115765 Amount of Each Receipt this Period 72.00 P/R Deduction (\$24.00 Semi-Monthly)
Name of Employer: NMMA - National Marine Manufacturers A Occupation: Vice President of Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 626.00		

C. Full Name (Last, First, Middle Initial) Mr. Jeff Gabriel Mailing Address 444 North Capitol Street, NW City Washington State DC Zip Code 20001-1512 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1720243815765 Amount of Each Receipt this Period 20.00 P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer: NMMA - Government Relations Office Occupation: Legislative Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 765.00		

SUBTOTAL of Receipts This Page (optional)	122.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms Maureen Healey		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6778 Edge Cliff Dr		Transaction ID: PR1751548115765	
City Alexandria	State VA	Zip Code 22315-2603	Amount of Each Receipt this Period _____ 375.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NMMA - Government Relations Office	Occupation Ex. Director PWIA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1750.00		

P/R Deduction (\$125.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Mrs. Brooke Fishel		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 444 North Capitol Street, NW Suite 645		Transaction ID: PR1784793515765	
City Washington	State DC	Zip Code 20001-1512	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NMMA - Government Relations Office	Occupation Manager of Communications		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		

P/R Deduction (\$10.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. Mr. Duncan Neasham		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 444 North Capitol Street, NW Suite 645		Transaction ID: PR1830664315765	
City Washington	State DC	Zip Code 20001-1512	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NMMA - Government Relations Office	Occupation Public Relations Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	_____ 435.00
TOTAL This Period (last page this line number only)	_____

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

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

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. John Shipley

Mailing Address 3207 Industrial 29th Street

City State Zip Code
Fort Pierce FL 34946-8642

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

Name of Employer Occupation
Maverick Boat Co., Inc. Supervisor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y

Transaction ID: PR1887137315765

Amount of Each Receipt this Period
20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	20.00
TOTAL This Period (last page this line number only)	▶	4486.37

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

<p>A. Reed Committee</p> <p>Full Name (Last, First, Middle Initial) Reed Committee</p> <p>Mailing Address PO Box 8628</p> <p>City Cranston State RI Zip Code 02920</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Senator Jack Reed</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 1</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 25056527</p> <p>Date of Disbursement 11 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
--	--	--

<p>B. Citizens For Harkin</p> <p>Full Name (Last, First, Middle Initial) Citizens For Harkin</p> <p>Mailing Address P O Box 811</p> <p>City Des Moines State IA Zip Code 50304</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Sen. Tom Harkin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 2</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 25056528</p> <p>Date of Disbursement 11 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
--	--	--

<p>C. Our Common Values PAC</p> <p>Full Name (Last, First, Middle Initial) Our Common Values PAC</p> <p>Mailing Address 101 W. Grand Ave. Suite 200</p> <p>City Chicago State IL Zip Code 60610</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</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>Transaction ID: 25056529</p> <p>Date of Disbursement 11 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 2500.00</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>4500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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 / 17

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

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Bring Back Baron		Transaction ID: 25070606 Date of Disbursement 12 / 04 / 2006	
Mailing Address 329 West Tipton		Amount of Each Disbursement this Period 500.00	
City Seymour State IN Zip Code 47274	Purpose of Disbursement Debt Retirement	011 Category/ Type	
Candidate Name Rep. Baron Hill	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 9	Debt Retirement		

Full Name (Last, First, Middle Initial) B. Lampson For Congress		Transaction ID: 25070611 Date of Disbursement 12 / 04 / 2006	
Mailing Address P.O. Box 58606		Amount of Each Disbursement this Period 500.00	
City Houston State TX Zip Code 77258	Purpose of Disbursement Debt Retirement	011 Category/ Type	
Candidate Name Rep. Nick Lampson	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	Debt Retirement		

Full Name (Last, First, Middle Initial) C. Melissa Bean For Congress		Transaction ID: 25070558 Date of Disbursement 12 / 04 / 2006	
Mailing Address Post Office Box 3068		Amount of Each Disbursement this Period 500.00	
City Barrington State IL Zip Code 60010	Purpose of Disbursement Debt Retirement	011 Category/ Type	
Candidate Name Rep. Melissa Bean	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 8	Debt Retirement		

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Joe Donnelly For Congress		Transaction ID: 25070600 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address P.O. Box 1961 Century Building		Amount of Each Disbursement this Period 500.00
City South Bend State IN Zip Code 46634	Debt Retirement	
Purpose of Disbursement Debt Retirement		011 Category/ Type
Candidate Name Mr. Joseph Donnelly		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 2
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ellsworth For Congress Committee		Transaction ID: 25070603 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address P.O. Box 62		Amount of Each Disbursement this Period 500.00
City Evansville State IN Zip Code 47701	Debt Retirement	
Purpose of Disbursement Debt Retirement		011 Category/ Type
Candidate Name Mr. Brad Ellsworth		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 8
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John Hall For Congress		Transaction ID: 25070604 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address PO Box 377		Amount of Each Disbursement this Period 500.00
City Dover Plains State NY Zip Code 12522	Debt Retirement	
Purpose of Disbursement Debt Retirement		011 Category/ Type
Candidate Name Mr. John Hall		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
National Marine Manufacturers Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Kagen 4 Congress		Transaction ID: 25070608 Date of Disbursement 12 / 04 / 2006	
Mailing Address 100 West Lawrence Street		Amount of Each Disbursement this Period 500.00	
City Appleton State WI Zip Code 54911	Purpose of Disbursement Debt Retirement	011 Category/Type	
Candidate Name Mr. Steven Kagen	Debt Retirement		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Perlmutter For Congress		Transaction ID: 25070612 Date of Disbursement 12 / 04 / 2006	
Mailing Address 3440 Youngfield St #264		Amount of Each Disbursement this Period 500.00	
City Wheat Ridge State CO Zip Code 80033	Purpose of Disbursement Debt Retirement	011 Category/Type	
Candidate Name Mr. Edwin Perlmutter	Debt Retirement		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 7	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tim Walz For Us Congress		Transaction ID: 25070613 Date of Disbursement 12 / 04 / 2006	
Mailing Address PO Box 938		Amount of Each Disbursement this Period 500.00	
City Mankato State MN Zip Code 56002	Purpose of Disbursement Debt Retirement	011 Category/Type	
Candidate Name Mr. Timothy Walz	Debt Retirement		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	9000.00