

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Impact

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 2 | 8 |

| | | | |
|---|---|---|---|
| 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 | | 53360.36 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 6 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 52080.31 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 5000.00 | 5000.00 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 57080.31 | 58360.36 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 30276.88 | 31556.93 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 26803.43 | 26803.43 | | | | | | | | |
| 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
Impact

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 2 |

| | |
|---|---|
| D | D |
| 2 | 8 |

| | | | |
|---|---|---|---|
| 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 | 0.00 | 0.00 |
| (i) Itemized (use Schedule A) | 0.00 | 0.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 5000.00 | 5000.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 5000.00 | 5000.00 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 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)) | 5000.00 | 5000.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 5000.00 | 5000.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 2776.88 | 4056.93 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 2776.88 | 4056.93 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 27500.00 | 27500.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 30276.88 | 31556.93 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 30276.88 | 31556.93 |

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) | 5000.00 | 5000.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 5000.00 | 5000.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 2776.88 | 4056.93 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 2776.88 | 4056.93 |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 6 / 10 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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)
Impact

A. Full Name (Last, First, Middle Initial)
New York Life PAC Federal Fund

Mailing Address 51 Madison Avenue

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | / | 0 | 7 | / | 2 | 0 | 0 | 6 |

Transaction ID: C38823

Amount of Each Receipt this Period
5000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Impact

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. 509 Madison Avenue Associates, LP | | Transaction ID: D5305 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6 |
| Mailing Address c/o Kensico Properties 509 Madison Ave. | | Amount of Each Disbursement this Period 232.57 |
| City New York State NY Zip Code 10022 | Purpose of Disbursement Rent (includes utilities) Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Category/Type 001 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Bank of America | | Transaction ID: D5304 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6 |
| Mailing Address 1455 Newport Ave. | | Amount of Each Disbursement this Period 251.08 |
| City Pawtucket State RI Zip Code 02861 | Purpose of Disbursement Payroll Taxes/Withholdings Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Category/Type 001 |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Daniel Krupnick | | Transaction ID: D5301 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 |
| Mailing Address 206 West 88th St. Apt. 5E | | Amount of Each Disbursement this Period 250.00 |
| City New York State NY Zip Code 10024 | Purpose of Disbursement Consulting Services-Fundraising Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Category/Type 003 |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 733.65 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Impact

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. David A. Nurnberg | | Transaction ID: D5300 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 |
| Mailing Address 330 East 39th St. Apt. 19H | | Amount of Each Disbursement this Period 502.38 |
| City New York State NY Zip Code 10016 | Purpose of Disbursement Payroll Wages Candidate Name Category/Type 001 | |
| 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. Verdolino & Lowey, P.C. | | Transaction ID: D5302 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6 |
| Mailing Address 124 Washington St. Suite 101 | | Amount of Each Disbursement this Period 791.31 |
| City Foxboro State MA Zip Code 02035 | Purpose of Disbursement Professional Services Accounting Candidate Name Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Verdolino & Lowey, P.C. | | Transaction ID: D5303 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 |
| Mailing Address 124 Washington St. Suite 101 | | Amount of Each Disbursement this Period 694.98 |
| City Foxboro State MA Zip Code 02035 | Purpose of Disbursement Professional Services Accounting Candidate Name Category/Type 001 | |
| 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) ▼ | |

| | |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1988.67 |
| TOTAL This Period (last page this line number only) ▶ | 2722.32 |

**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)
Impact

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Tammy Duckworth | | Transaction ID: D5308 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6 |
| Mailing Address 416 W 22nd St. | | Amount of Each Disbursement this Period 2500.00 |
| City Lombard State IL Zip Code 60148 | Purpose of Disbursement 2006 IL-H--Primary Candidate Name Tammy Duckworth Category/Type 011 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Klobuchar for Minnesota | | Transaction ID: D5311 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6 |
| Mailing Address 1430 Concordia Ave. PO Box 4146 | | Amount of Each Disbursement this Period 5000.00 |
| City Saint Paul State MN Zip Code 55104 | Purpose of Disbursement 2006 MN-S--General Candidate Name Amy Klobuchar Category/Type 011 | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Klobuchar for Minnesota | | Transaction ID: D5312 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6 |
| Mailing Address 1430 Concordia Ave. PO Box 4146 | | Amount of Each Disbursement this Period 5000.00 |
| City Saint Paul State MN Zip Code 55104 | Purpose of Disbursement 2006 MN-S--Primary Candidate Name Amy Klobuchar Category/Type 011 | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 12500.00 |
| 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)
Impact

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Pederson 2006 | | Transaction ID: D5313 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6 |
| Mailing Address PO Box 34144 | | Amount of Each Disbursement this Period 5000.00 |
| City Phoenix | State AZ | |
| Zip Code 85067 | | |
| Purpose of Disbursement 2006 AZ-S--General | | |
| Candidate Name Jim Pederson | | 011 Category/ Type |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: AZ District: | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Stabelnow for US Senate | | Transaction ID: D5309 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6 |
| Mailing Address PO Box 4945 | | Amount of Each Disbursement this Period 5000.00 |
| City East Lansing | State MI | |
| Zip Code 48826 | | |
| Purpose of Disbursement 2006 MI-S--Primary | | |
| Candidate Name Debbie Stabelnow | | 011 Category/ Type |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: MI District: | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Stabelnow for US Senate | | Transaction ID: D5310 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6 |
| Mailing Address PO Box 4945 | | Amount of Each Disbursement this Period 5000.00 |
| City East Lansing | State MI | |
| Zip Code 48826 | | |
| Purpose of Disbursement 2006 MI-S--General | | |
| Candidate Name Debbie Stabelnow | | 011 Category/ Type |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: MI District: | | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 15000.00 |
| TOTAL This Period (last page this line number only) ▶ | 27500.00 |