

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
Western Majority Project

ADDRESS (number and street) 191 University Blvd. #824
 Check if different than previously reported. (ACC)
Denver CO 80206

2. **FEC IDENTIFICATION NUMBER** C00432211
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 01 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 Alice Madden

Signature of Treasurer Electronically Filed by Alice Madden Date 07 31 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
Western Majority Project

Report Covering the Period: From:

M	M
0	1

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	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	7									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td>46750.00</td></tr></table>	46750.00	<table border="1" style="width: 100%;"><tr><td>46750.00</td></tr></table>	46750.00								
46750.00												
46750.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td>46750.00</td></tr></table>	46750.00	<table border="1" style="width: 100%;"><tr><td>46750.00</td></tr></table>	46750.00								
46750.00												
46750.00												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td>2245.77</td></tr></table>	2245.77	<table border="1" style="width: 100%;"><tr><td>2245.77</td></tr></table>	2245.77								
2245.77												
2245.77												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td>44504.23</td></tr></table>	44504.23	<table border="1" style="width: 100%;"><tr><td>44504.23</td></tr></table>	44504.23								
44504.23												
44504.23												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Western Majority Project

Report Covering the Period: From:

M	M
0	1

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)	9750.00	9750.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9750.00	9750.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	37000.00	37000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	46750.00	46750.00
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))	46750.00	46750.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	46750.00	46750.00

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.....	2245.77	2245.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2245.77	2245.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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))..	2245.77	2245.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	2245.77	2245.77

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)	46750.00	46750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46750.00	46750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2245.77	2245.77
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2245.77	2245.77

**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"/> 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)
Western Majority Project

Full Name (Last, First, Middle Initial) A. Flora Jewell-Stern		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007	
Mailing Address 265 Elm St.		Transaction ID: 11ai-000000001	
City State Zip Code Denver CO 80220	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer N/A Occupation Housewife	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Katie Reinish		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007	
Mailing Address State Capitol 200 E. Colfax 222		Transaction ID: 11ai-000000002	
City State Zip Code Denver CO 80203	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer State of Colorado - House of Represent Occupation Communications Director	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Doug Phelps		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2007	
Mailing Address 1550 Larimer St., # 216		Transaction ID: 11ai-000000004	
City State Zip Code Denver CO 80202	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Consultant	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 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)
Western Majority Project

A. Full Name (Last, First, Middle Initial) Chris Findlater Mailing Address 394 Dillon Ave City Cheyenne State WY Zip Code 82001 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7 Transaction ID: 11 ai-000000006 Amount of Each Receipt this Period 5000.00
Name of Employer: Cheyenne Exploration Occupation: CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		

B. Full Name (Last, First, Middle Initial) Joyce Cowan Mailing Address 3730 Van Ness St., NW City Washington State DC Zip Code 20016 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7 Transaction ID: 11 ai-000000014 Amount of Each Receipt this Period 500.00
Name of Employer: Sonnenschein Nath & Rosen-thal Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Shannon Finley Mailing Address 2909 Cleveland Ave, NW City Washington State DC Zip Code 20008 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7 Transaction ID: 11 ai-000000016 Amount of Each Receipt this Period 500.00
Name of Employer: Capitol Counsel Occupation: Political Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	6000.00
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 8 / 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)
Western Majority Project

Full Name (Last, First, Middle Initial) A. Rita Lewis		Date of Receipt M M / D D / Y Y Y Y Y 06 / 19 / 2007	
Mailing Address 2226 N.Lexington St		Transaction ID: 11ai-00000017	
City Arlington	State VA	Zip Code 22205	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer The Washington Group	Occupation Principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Patrick Murphy		Date of Receipt M M / D D / Y Y Y Y Y 06 / 19 / 2007	
Mailing Address 1341 G Street, NW Suite 700		Transaction ID: 11ai-00000018	
City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer mCapitol Management	Occupation Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	9750.00

**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 9 / 17
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Western Majority Project

Full Name (Last, First, Middle Initial) A. Rocky Mountain PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007	
Mailing Address 607 14th Street, NW Suite 800		Transaction ID: 11c-000000003	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00409128			
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. Searchlight Leadership Fund		Date of Receipt M M / D D / Y Y Y Y 05 / 24 / 2007	
Mailing Address 422 C Street, NE Lower Level		Transaction ID: 11c-000000005	
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00327395			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. American Gaming Association		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2007	
Mailing Address 1299 Pennsylvania Ave, NW Suite 1175E		Transaction ID: 11c-000000007	
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00309146			
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	

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

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

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

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NAME OF COMMITTEE (In Full)
Western Majority Project

Full Name (Last, First, Middle Initial) A. New York Life Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 51 Madison Ave, Room 1009		Transaction ID: 11c-000000008
City State Zip Code New York NY 10010	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00158881		
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. Senior Housing Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 5100 Wisconsin Ave, NW Suite 307		Transaction ID: 11c-000000009
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00325332		
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) C. SIFMA - PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 1425 K Steet, NW 7th Floor		Transaction ID: 11c-000000010
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00067504		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
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 11 / 17
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Western Majority Project

Full Name (Last, First, Middle Initial) A. Int. Brotherhood of Boilermakers Campaign Assistance Fund		Date of Receipt M M / D D / Y Y Y Y Y 06 / 19 / 2007	
Mailing Address 753 State Ave, Suite 565		Transaction ID: 11c-000000011	
City State Zip Code Kansas City KS 66101-2511	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00005157			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. WINDPAC		Date of Receipt M M / D D / Y Y Y Y Y 06 / 19 / 2007	
Mailing Address 1101 14th St., NW 12th Floor		Transaction ID: 11c-000000012	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00259572			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. American International Group, Inc		Date of Receipt M M / D D / Y Y Y Y Y 06 / 19 / 2007	
Mailing Address 70 Pine St, 19th Floor		Transaction ID: 11c-000000013	
City State Zip Code New York NY 10270	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00097725			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

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

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

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

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NAME OF COMMITTEE (In Full)
Western Majority Project

A. Full Name (Last, First, Middle Initial)
NEA Fund for Children & Public Education

Mailing Address 1201 16th Street, NW
Suite 420

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

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	6	/	1	9	/	2	0	0	7

Transaction ID: 11c-000000015

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)	▶	37000.00

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 13 / 17

<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)
Western Majority Project

<p>A. Broward Atwater</p> <p>Full Name (Last, First, Middle Initial) Broward Atwater</p> <p>Mailing Address 513 W. Leigh Creek Rd.</p> <p>City Tetonia State ID Zip Code 83452</p> <p>Purpose of Disbursement See Memo Items</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21b-02-00003-0000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="540.54"/></p>
<p>Purpose of Disbursement: See Memo Items</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Yellow-Checker Star</p> <p>Full Name (Last, First, Middle Initial) Yellow-Checker Star</p> <p>Mailing Address 5225 W. Post Rd</p> <p>City Las Vegas State NV Zip Code 89118</p> <p>Purpose of Disbursement Cab Fare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21b-02-00003-00005</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="67.00"/></p>
<p>Purpose of Disbursement: Cab Fare</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

[MEMO ITEM]

<p>C. Southwest Airlines</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address PO Box 36647 1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21b-02-00003-00003</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="270.80"/></p>
<p>Purpose of Disbursement: Airfare</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

[MEMO ITEM]

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="540.54"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></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)

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

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NAME OF COMMITTEE (In Full)
Western Majority Project

Full Name (Last, First, Middle Initial) A. Fairfield Inn Las Vegas		Transaction ID: 21b-02-00003-00004 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3850 S. Paradise Rd.		Amount of Each Disbursement this Period 202.74	
City Las Vegas State NV Zip Code 89109	[MEMO ITEM]		
Purpose of Disbursement Lodging 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. Kelly Nordini			

Full Name (Last, First, Middle Initial) B. Kelly Nordini		Transaction ID: 21b-02-00004-0000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2557 Xanthia Ct.		Amount of Each Disbursement this Period 310.30	
City Denver State CO Zip Code 80238	[MEMO ITEM]		
Purpose of Disbursement See Memo Items 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) C. A-Cab Taxi Service			

Full Name (Last, First, Middle Initial) C. A-Cab Taxi Service		Transaction ID: 21b-02-00004-00007 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 4444 S. Valley View Blvd.		Amount of Each Disbursement this Period 90.00	
City Las Vegas State NV Zip Code 89103	[MEMO ITEM]		
Purpose of Disbursement Cab Fare 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) SUBTOTAL of Disbursements This Page (optional)			

SUBTOTAL of Disbursements This Page (optional)	310.30
TOTAL This Period (last page this line number only)	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Western Majority Project

Full Name (Last, First, Middle Initial) A. Expedia.com		Transaction ID: 21b-02-00004-00006 Date of Disbursement 04 / 25 / 2007	
Mailing Address PO Box 290 2897 N. Druid Hills Rd.		Amount of Each Disbursement this Period 220.30	
City Atlanta State GA Zip Code 30329	Purpose of Disbursement Airfare	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) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. CommonCentsConsulting, LLC		Transaction ID: 21b-02-00005-00008 Date of Disbursement 04 / 25 / 2007	
Mailing Address PO Box 12011		Amount of Each Disbursement this Period 500.00	
City Casa Grande State AZ Zip Code 85230	Purpose of Disbursement Compliance Consulting	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) C. Perkins Coie		Transaction ID: 21b-02-00008-00011 Date of Disbursement 05 / 15 / 2007	
Mailing Address 1201 Third Avenue, 40th Floor		Amount of Each Disbursement this Period 270.00	
City Seattle State WA Zip Code 98101	Purpose of Disbursement Legal Services	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) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	770.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Western Majority Project

A. Perkins Coie Full Name (Last, First, Middle Initial) Mailing Address 1201 Third Avenue, 40th Floor City Seattle State WA Zip Code 98101 Purpose of Disbursement Legal 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) ▼		Transaction ID: 21b-02-00011-00014 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 225.00 Category/Type
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B. David Winkler Full Name (Last, First, Middle Initial) Mailing Address 715 Logan St. City Denver State CO Zip Code 80203 Purpose of Disbursement See Memo Items 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) ▼		Transaction ID: 21b-02-00012-0000 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 366.56 Category/Type
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C. Mail Boxes, Etc. Full Name (Last, First, Middle Initial) Mailing Address 191 University Blvd. City Denver State CO Zip Code 80206 Purpose of Disbursement PO Box Rental Fee 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) ▼		Transaction ID: 21b-02-00012-00015 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 90.00 Category/Type [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	591.56
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Western Majority Project

Full Name (Last, First, Middle Initial) A. Mail Boxes, Etc.		Transaction ID: 21b-02-00012-00016 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 191 University Blvd.		Amount of Each Disbursement this Period 75.00
City Denver State CO Zip Code 80206	[MEMO ITEM]	
Purpose of Disbursement PO Box Rental Fee 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&D Printing, Inc.		Transaction ID: 21b-02-00012-00017 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 5351 Tennyson St., Unit 1-C		Amount of Each Disbursement this Period 201.56
City Denver State CO Zip Code 80212	[MEMO ITEM]	
Purpose of Disbursement Business Reply Envelopes 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) ▼

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	2212.40