



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Restore America PAC, Inc.

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

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

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 5 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 5 |

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |         |
|--|-------------------------|-----------------------------------|---|---|---|---|---|---|--|---------|
| 6. (a) Cash on Hand<br>January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><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>5</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 5 |  | 9808.88 |
| Y  | Y                       | Y                                 | Y |   |   |   |   |   |  |         |
| 2  | 0                       | 0                                 | 5 |   |   |   |   |   |  |         |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....   | 9808.88                 |                                   |   |   |   |   |   |   |  |         |
| (c) Total Receipts (from Line 19) .....  | 172150.00               | 242137.32                         |   |   |   |   |   |   |  |         |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....   | 181958.88               | 251946.20                         |   |   |   |   |   |   |  |         |
| 7. Total Disbursements (from Line 31) .....  | 119361.46               | 144196.98                         |   |   |   |   |   |   |  |         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....  | 62597.42                | 107749.22                         |   |   |   |   |   |   |  |         |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |   |   |   |   |   |   |  |         |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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  
Restore America PAC, Inc.

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

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

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 5 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 5 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 80900.00                      | 120457.32                         |
| (i) Itemized (use Schedule A) .....  | 250.00                        | 930.00                            |
| (ii) Unitemized .....  | 81150.00                      | 121387.32                         |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 91000.00                      | 120750.00                         |
| (c) Other Political Committees (such as PACs) .....  | 172150.00                     | 242137.32                         |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     |                               |                                   |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 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)) .....                          | 172150.00                     | 242137.32                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 172150.00                     | 242137.32                         |

**DETAILED SUMMARY PAGE**

of Disbursements

| II. DISBURSEMENTS   | COLUMN A<br>Total This Period | COLUMN B<br>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.....   | 81861.46                      | 92533.57                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                           | 81861.46                      | 92533.57                          |
| 22. Transfers to Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....          | 30000.00                      | 30000.00                          |
| 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 .....                                   | 5000.00                       | 5500.00                           |
| (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)) .....                            | 5000.00                       | 5500.00                           |
| 29. Other Disbursements.....  | 2500.00                       | 16163.41                          |
| 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))..        | 119361.46                     | 144196.98                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 119361.46                     | 144196.98                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 172150.00                     | 242137.32                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 5000.00                       | 5500.00                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 167150.00                     | 236637.32                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 81861.46                      | 92533.57                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 81861.46                      | 92533.57                          |

**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 / 71                  |
|  | <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             |                              |

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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Randall Moorhead

Mailing Address 12136 Holly Knoll Circle

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Phillips Electronics Occupation Dir Governmental Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
11 / 15 / 2005

Transaction ID: 60119.C492

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Freddy L. Polk

Mailing Address 412 Brookwood

City State Zip Code  
Lansing KS 66043

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

Name of Employer Iron Free Research Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 25 / 2005

Transaction ID: 60119.C480

Amount of Each Receipt this Period  
4000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Theodore J. Day

Mailing Address 165 W. Liberty St. Suite 100

City State Zip Code  
Reno NV 89501

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

Name of Employer Self employed Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2005

Transaction ID: 60119.C442

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 5500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 7 / 71                  |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Baraka Realty Co.  
Mailing Address 1000 Pennsylvania Avenue  
City State Zip Code  
Brooklyn NY 11207  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2005  
Transaction ID: 60119.C433  
Amount of Each Receipt this Period  
500.00  
Receipt  
NOTE: PARTNERSHIP All PTS <\$200

**B.** Full Name (Last, First, Middle Initial)  
John W. Bode  
Mailing Address 431 NW 17th Street  
City State Zip Code  
Oklahoma City OK 73103  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Olsson Frank & Weeda, P.C. Attorney  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
10 / 03 / 2005  
Transaction ID: 60119.C459  
Amount of Each Receipt this Period  
1000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Frank J. Russo  
Mailing Address 12 Evangelista Way  
City State Zip Code  
Wakefield MA 01880-1981  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
CFO  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 29 / 2005  
Transaction ID: 60119.C413  
Amount of Each Receipt this Period  
2000.00  
Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 8 / 71                  |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
David G. Kinney

Mailing Address 946 Linda Flora Dr.

City State Zip Code  
Los Angeles CA 90049

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

Name of Employer PSVratings Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 29 / 2005

Transaction ID: 60119.C414

Amount of Each Receipt this Period  
2000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
K. Earl Durden

Mailing Address 2605 Thomas Drive

City State Zip Code  
Panama City FL 32408

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

Name of Employer Florida East Coast Industries Occupation Vice president

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 29 / 2005

Transaction ID: 60119.C415

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Philip Seth Corwin

Mailing Address 6101 Edsall Rd.  
Apt. 611

City State Zip Code  
Alexandria VA 22304

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

Name of Employer Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 29 / 2005

Transaction ID: 60119.C422

Amount of Each Receipt this Period  
500.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 9 / 71                  |
|  | <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  |

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Patricia Jones Paoletta

Mailing Address 6714 Marbo Court

City Falls Church State VA Zip Code 22046

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

Name of Employer Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
07 / 29 / 2005

Transaction ID: 60119.C423

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jonathan Band

Mailing Address 6624 Struttman Lane

City Rockville State MD Zip Code 20852-3675

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

Name of Employer Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
07 / 29 / 2005

Transaction ID: 60119.C424

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 2005 Carrhill Rd

City Vienna State VA Zip Code 22181

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

Name of Employer Occupation Dir Governmental Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
08 / 16 / 2005

Transaction ID: 60119.C430

Amount of Each Receipt this Period  
1000.00

Receipt

**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 10 / 71  |
| <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)  
Restore America PAC, Inc.

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> J. Patrick Cave  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 1 6 / 2 0 0 5 |  |
| Mailing Address 3215 45th St. NW  |  | Transaction ID: 60119.C431                                    |  |
| City State Zip Code<br>Washington DC 20016  | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Receipt   |  |
| Name of Employer<br>Occupation<br>Dir Governmental Affairs  | Aggregate Year-to-Date ▼<br>500.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Christine Vineis   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 1 6 / 2 0 0 5 |  |
| Mailing Address 4920 Riverside Dr.  |  | Transaction ID: 60119.C432                                    |  |
| City State Zip Code<br>Columbus OH 43220-2876   | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Receipt   |  |
| Name of Employer<br>Occupation<br>Executive   | Aggregate Year-to-Date ▼<br>500.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Alex N Vogel   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 2 3 / 2 0 0 5 |  |
| Mailing Address 7874 Wellington Dr.   |   | Transaction ID: 60119.C441                                    |  |
| City State Zip Code<br>Warrenton VA 20186   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |  |
| Name of Employer<br>Occupation<br>Mehlman Vogel Castagnetti, Inc<br>Principal   | Aggregate Year-to-Date ▼<br>1000.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 11 / 71                 |
|  | <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  |

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Craig E. Richardson

Mailing Address 1610 Walden Dr.

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
Self-employed Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2005

Transaction ID: 60119.C445

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey A. Citron

Mailing Address 2147 Route 27

City State Zip Code  
Edison NJ 08817

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

Name of Employer Occupation  
Vonage CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2005

Transaction ID: 60119.C446

Amount of Each Receipt this Period  
2000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Martin J. Gillespie

Mailing Address 124 Harvard St.

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
RNC Coordinator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2005

Transaction ID: 60119.C449

Amount of Each Receipt this Period  
500.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 12 / 71                 |
|  | <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  |

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Andrew R. Cochran

Mailing Address 7068 Solomon Seal Ct.

City State Zip Code  
Springfield VA 22152

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

Name of Employer Gage Occupation Vice president

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2005

Transaction ID: 60119.C450

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Andrew R. Cochran

Mailing Address 7068 Solomon Seal Ct.

City State Zip Code  
Springfield VA 22152

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

Name of Employer Gage Occupation Vice president

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 03 / 2005

Transaction ID: 60119.C457

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Marjorie J Dannenfelser

Mailing Address 1511 N Harrison St.

City State Zip Code  
Arlington VA 22205-2726

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

Name of Employer Susan B. Anthony List Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2005

Transaction ID: 60119.C451

Amount of Each Receipt this Period  
500.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 13 / 71 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Robert A. McConnell

Mailing Address 6614 Weatherford Ct.

City State Zip Code  
Mc Lean VA 22101-1643

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

Name of Employer Occupation  
Hawthorne & York International Attorney at Law

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 5

Transaction ID: 60119.C458

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Patrick A. Templeton

Mailing Address 4850 Montgomery Lane

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation  
BKSH & Associates Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 5

Transaction ID: 60119.C460

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey M. Mackinnon

Mailing Address 3753 Oliver Street NW

City State Zip Code  
Washington DC 20015

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

Name of Employer Occupation  
Ryan Phillips, Utrecht & Macki Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 0 5

Transaction ID: 60119.C464

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 14 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Ray B. Chambers

Mailing Address 1431 Woodacre Dr.

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Mc Lean | VA    | 22101-2533 |

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

|  |                        |
|--|------------------------|
| Name of Employer<br>Chambers, Colon & Hartwell | Occupation<br>Chairman |
|--|------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 7 | / | 2 | 0 | 0 | 5 |

Transaction ID: 60119.C465

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Henry Schlesinger

Mailing Address 18802 Pheasant Lane

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Tomball | TX    | 77377    |

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

|                                   |                          |
|-----------------------------------|--------------------------|
| Name of Employer<br>Self-Employed | Occupation<br>Consultant |
|-----------------------------------|--------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 1 | / | 2 | 0 | 0 | 5 |

Transaction ID: 60119.C470

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Raymond R Wheeler

Mailing Address 2615 Stanford St.

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Houston | TX    | 77006-2927 |

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

|                                  |                          |
|----------------------------------|--------------------------|
| Name of Employer<br>Coral Energy | Occupation<br>Consultant |
|----------------------------------|--------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 1 | / | 2 | 0 | 0 | 5 |

Transaction ID: 60119.C471

Amount of Each Receipt this Period  
250.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 15 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Joshua C Crescenzi

Mailing Address 1301 Wood Hollow Dr.  
Apt. 11101

City State Zip Code  
Houston TX 77057

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

Name of Employer: Worldwide Strategic Partners  
Occupation: Senior Project Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: 60119.C472

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Stephen P Payne

Mailing Address 5847 San Felipe  
#3275

City State Zip Code  
Houston TX 77057

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

Name of Employer: Stephen Payne Consulting  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: 60119.C474

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Stephen P Payne

Mailing Address 5847 San Felipe  
#3275

City State Zip Code  
Houston TX 77057

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

Name of Employer: Stephen Payne Consulting  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

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

Transaction ID: 60119.C473

Amount of Each Receipt this Period  
2000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 16 / 71                 |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Stephen P Payne

Mailing Address 5847 San Felipe #3275

City State Zip Code  
Houston TX 77057

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

Name of Employer Occupation  
Stephen Payne Consulting Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

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

Transaction ID: 60119.C475

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Roger S. Sofer

Mailing Address 2700 Post Oak Blvd. No. 1150

City State Zip Code  
Houston TX 77056

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

Name of Employer Occupation  
Sofer Steiner & Associates LLP Insurance Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 60119.C476

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 5847 San Felipe St. Suite 3275

City State Zip Code  
Houston TX 77057

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

Name of Employer Occupation  
Law Offices of Brian Ettinger Attorney/Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 60119.C477

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 17 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Jane Grote Hipp

Mailing Address 809 N. Quaker Lane

City State Zip Code  
Alexandria VA 22302

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

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

Transaction ID: 60119.C482

Amount of Each Receipt this Period  
2500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Michael H. Herson

Mailing Address 8709 Burning Tree Road

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
American Defense International President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

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

Transaction ID: 60119.C483

Amount of Each Receipt this Period  
2500.00

Receipt

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

Mailing Address 1506 Laburnum Street

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
Ernst & Young Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

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

Transaction ID: 60119.C484

Amount of Each Receipt this Period  
1500.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 6500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 18 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Mitchell M. Rohde

Mailing Address 7751 Sunset Ct.

City State Zip Code  
Saline MI 48176

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

Name of Employer Occupation  
Quantum Signal Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: 60119.C485

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
William J. Williams

Mailing Address 5650 Warren Road

City State Zip Code  
Ann Arbor MI 48105

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

Name of Employer Occupation  
Quantum Signal Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: 60119.C486

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
L.b. Doggett

Mailing Address 666 11th Street NW #300

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation  
Doggett Enterprises Inc President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: 60119.C491

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 19 / 71 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Thomas B. Patton

Mailing Address 3201 Aberfoyle Pl. NW

City State Zip Code  
Washington DC 20015

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

Name of Employer Phillips Electronics Occupation Vice president

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
11 / 15 / 2005

Transaction ID: 60119.C493

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Manus M. Cooney

Mailing Address 8801 Bel Air Pl.

City State Zip Code  
Potomac MD 20854

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

Name of Employer Potomac Counsel Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 19 / 2005

Transaction ID: 60119.C498

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
John P. McAllister

Mailing Address 326 South Carolina Avenue, S.E.

City State Zip Code  
Washington DC 20003

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

Name of Employer McAllister & Quinn Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 19 / 2005

Transaction ID: 60119.C499

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 20 / 71                 |
|  | <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  |

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Kenneth J. Giacin

Mailing Address P.O. Box 539

City State Zip Code  
New Hope PA 18938

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

Name of Employer Occupation  
Stemcyte Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 19 / 2005

Transaction ID: 60119.C500

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Martha F Curt

Mailing Address 7372 Goods Mill Rd.

City State Zip Code  
Harrisonburg VA 22801-6026

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
11 / 23 / 2005

Transaction ID: 60119.C504

Amount of Each Receipt this Period  
2500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Walter M Curt

Mailing Address 7372 Goods Mill Rd.

City State Zip Code  
Harrisonburg VA 22801-6026

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

Name of Employer Occupation  
Shenandoah Services, LLC Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
11 / 23 / 2005

Transaction ID: 60119.C505

Amount of Each Receipt this Period  
2500.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 6000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 21 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
T Carver Melton

Mailing Address 235 Cantrell Ave

City State Zip Code  
Harrisonburg VA 22801

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

Name of Employer  
Rockingham Memorial Hospital

Occupation  
CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 15 / 2005

**Transaction ID:** 60119.C508

Amount of Each Receipt this Period  
2500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Shahin A Sadik

Mailing Address 827 Malcom Ave.

City State Zip Code  
Los Angeles CA 90024-3103

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

Name of Employer  
Universal Pain Management Medi

Occupation  
Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 17 / 2005

**Transaction ID:** 60119.C509

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
F. Bo Zarnegin

Mailing Address 1010 N. Rexford Dr.

City State Zip Code  
Beverly Hills CA 90210-2

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

Name of Employer  
Zarnegin Family Foundation

Occupation  
Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 17 / 2005

**Transaction ID:** 60119.C510

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 4500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 22 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Arnold Schlesinger

Mailing Address 9595 Wilshire Blvd

City State Zip Code  
Beverly Hills CA 90212

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

Name of Employer Occupation  
Self-employed Real Estate Investor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 17 / 2005

**Transaction ID:** 60119.C511

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Asher Bartov

Mailing Address 645 Hawaii Street

City State Zip Code  
El Segundo CA 90245

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

Name of Employer Occupation  
Federal Industries, Inc Vice president

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 17 / 2005

**Transaction ID:** 60119.C512

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 9766 Beth Place

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
Hilton Hyland Real estate

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 17 / 2005

**Transaction ID:** 60119.C513

Amount of Each Receipt this Period  
1000.00

Receipt

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>3000.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 23 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Jay A Kaplan

Mailing Address 5909 W. 3rd St.

City State Zip Code  
Los Angeles CA 90036

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

Name of Employer Occupation  
Kaplan Law Corporation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 17 / 2005

Transaction ID: 60119.C514

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Lyle Weisman

Mailing Address 14001 Ventura Blvd.

City State Zip Code  
Sherman Oaks CA 91423

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

Name of Employer Occupation  
Self-Employed Business executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 17 / 2005

Transaction ID: 60119.C515

Amount of Each Receipt this Period  
2000.00

Receipt

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

Mailing Address 433 N. Camden Dr.  
#107-D

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
Black Equities President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 17 / 2005

Transaction ID: 60119.C516

Amount of Each Receipt this Period  
250.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 24 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Mordechai Y. Orian

Mailing Address 23458 W. Moon Shadows Dr.

City Malibu State CA Zip Code 90265

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

Name of Employer Global Horizons, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 5

Transaction ID: 60119.C517

Amount of Each Receipt this Period  
2000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Yaron R. Hassid

Mailing Address 301 N. Canon Drive Ste. E

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Caldwell Banker Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 5

Transaction ID: 60119.C518

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Brian Joel Nissel

Mailing Address 6404 Wilshire Blvd. Suite 840

City Los Angeles State CA Zip Code 90048

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

Name of Employer Wilshire Skyline, Inc Occupation Real Estate Developer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 60119.C519

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 4000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 25 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Joseph P Duggan

Mailing Address 3632 Jenifer St. NW

City State Zip Code  
Washington DC 20015

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

Name of Employer Occupation  
USAID Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: 60119.C522

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Dirksen J. Lehman

Mailing Address 5025 34th Road N

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Clark & Weinstock Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: 60119.C523

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Christopher R DArCy

Mailing Address 6161 Gardenia Ct.

City State Zip Code  
Alexandria VA 22310-1789

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

Name of Employer Occupation  
Clark & Weinstock Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: 60119.C524

Amount of Each Receipt this Period  
250.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 26 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Julie Hershey Carr

Mailing Address 6038 9th Street North

City State Zip Code  
Arlington VA 22205

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

Name of Employer Occupation  
Clark & Weinstock Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
12 / 20 / 2005

Transaction ID: 60119.C525

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Edward Samuel Kutler

Mailing Address 6405 Tree Top Circle

City State Zip Code  
Columbia MD 21045-2895

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

Name of Employer Occupation  
Clark & Weinstock Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
12 / 20 / 2005

Transaction ID: 60119.C526

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Erik J. Hotmire

Mailing Address 4408 Random Ct.

City State Zip Code  
Annandale VA 22003

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

Name of Employer Occupation  
Clark & Weinstock Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 20 / 2005

Transaction ID: 60119.C527

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 27 / 71 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Lisa C. Hayes

Mailing Address 801 South Royal Street

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Clark & Weinstock Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 60119.C528

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Vin Weber

Mailing Address 7701 Ridgecrest Dr.

City State Zip Code  
Alexandria VA 22308

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

Name of Employer Occupation  
Clark & Weinstock Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 60119.C529

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 14001 Ventura Blvd.

City State Zip Code  
Sherman Oaks CA 91423-3511

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

Name of Employer Occupation  
Self- Employed Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 60119.C530

Amount of Each Receipt this Period  
500.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 28 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Louis Kemp

Mailing Address 661 Doheny Road

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: 60119.C531

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
R. Edward Ingle

Mailing Address 2101 Arrowleaf Drive

City State Zip Code  
Vienna VA 22182-5192

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

Name of Employer Occupation  
Microsoft Corporation Govt. Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: 60119.C533

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 332 11th Street NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation  
Willkie Farr & Gallagher LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: 60119.C534

Amount of Each Receipt this Period  
500.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 29 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Helen Costello

Mailing Address 110 E. Ninth Street  
Suite A333

City State Zip Code  
Los Angeles CA 90079

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

Name of Employer Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C538

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
William R. Goyette

Mailing Address 875 Windridge Circle

City State Zip Code  
CA 92078

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

Name of Employer Occupation  
Northrop-Grumman Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C539

Amount of Each Receipt this Period  
400.00

Receipt

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

Mailing Address 17052 Old Yucca Trail

City State Zip Code  
Escondido CA 92027

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

Name of Employer Occupation  
Culture of Life Family Service Treasurer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C540

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2400.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 30 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Jessica Robles Abiva

Mailing Address 528 S Morningstar Drive

City State Zip Code  
Anaheim CA 92808

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

Name of Employer Occupation  
Self employed Actress

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C541

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Douglas J Brown

Mailing Address 9255 Doheny Rd.  
Apt. 1406

City State Zip Code  
West Hollywood CA 90069-3217

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

Name of Employer Occupation  
KWK Management Partner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C542

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Charles S. Limandri

Mailing Address P.O. Box 9120

City State Zip Code  
Rancho Santa Fe CA 92067

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C543

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |  |              |
|--|--|--------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 31 / 71 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Marie A. Finn

Mailing Address 8975 Lawrence Welk Drive  
# 76

City Escondido State CA Zip Code 92026

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C544

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Melinda Wayne Munoz

Mailing Address 204 Ruby Avenue

City Newport Beach State CA Zip Code 92662-1128

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C545

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
James G. Stabile

Mailing Address 2120 Wilson Pl

City Escondido State CA Zip Code 92027

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

Name of Employer Owner Occupation Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C546

Amount of Each Receipt this Period  
250.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1750.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 32 / 71                 |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
George Delgado

Mailing Address 28345 Tricia PI

City Escondido State CA Zip Code 92026

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

Name of Employer Culture of Life Family Service  
Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C547

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
George Delgado

Mailing Address 28345 Tricia PI

City Escondido State CA Zip Code 92026

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

Name of Employer Culture of Life Family Service  
Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C548

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 3249 Avenida de Sueno

City Carlsbad State CA Zip Code 92009

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60119.C550

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 33 / 71                 |
|  | <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)  
Restore America PAC, Inc.

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Tom Allen  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 2 / 3 0 / 2 0 0 5 |
| Mailing Address 3249 Avenida de Sueno   |  | Transaction ID: 60119.C551                                    |
| City State Zip Code<br>Carlsbad CA 92009  | Amount of Each Receipt this Period<br>333.34                 |   |
| FEC ID number of contributing federal political committee.<br>C   | Memo<br><b>[MEMO ITEM]</b><br>Partnership->Catholic Outreach |   |
| Name of Employer Catholic Outreach<br>Occupation Partner  | Aggregate Year-to-Date ▼<br>333.34                           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Anthony DeBellis   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 2 / 3 0 / 2 0 0 5 |
| Mailing Address 3249 Avenida de Sueno   |  | Transaction ID: 60119.C552                                    |
| City State Zip Code<br>Carlsbad CA 92009  | Amount of Each Receipt this Period<br>333.33                 |   |
| FEC ID number of contributing federal political committee.<br>C   | Memo<br><b>[MEMO ITEM]</b><br>Partnership->Catholic Outreach |   |
| Name of Employer Catholic Outreach<br>Occupation Partner  | Aggregate Year-to-Date ▼<br>333.33                           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Matthew Pinto  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 2 / 3 0 / 2 0 0 5 |
| Mailing Address 3249 Avenida de Sueno   |  | Transaction ID: 60119.C553                                    |
| City State Zip Code<br>Carlsbad CA 92009  | Amount of Each Receipt this Period<br>333.33                 |   |
| FEC ID number of contributing federal political committee.<br>C   | Memo<br><b>[MEMO ITEM]</b><br>Partnership->Catholic Outreach |   |
| Name of Employer Catholic Outreach<br>Occupation Partner  | Aggregate Year-to-Date ▼<br>333.33                           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |

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

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

|  |                              |                              |                             |                             |
|--|------------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             |                              | PAGE 34 / 71                |                             |
|  | (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"/> 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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Marc Benguigui

Mailing Address 8735 Bonhner Dr.

City State Zip Code  
Los Angeles CA 90048

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

Name of Employer Occupation  
Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

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

Transaction ID: 60122.C584

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1000.00  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 80900.00 |

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

|  |                              |                              |   |                             |                             |                             |                             |                             |
|--|------------------------------|------------------------------|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 35 / 71                 |   |                             |                             |                             |                             |                             |
|  | (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 |

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Federal Express PAC

Mailing Address P.O. Box 529

City State Zip Code  
Washington DC 20044-0529

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

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  
1 0 / 1 1 / 2 0 0 5

Transaction ID: 60119.C466

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Koch PAC

Mailing Address 655 15th Street N.W.

City State Zip Code  
Washington DC 20005

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

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  
1 0 / 2 4 / 2 0 0 5

Transaction ID: 60119.C478

Amount of Each Receipt this Period  
2500.00

Receipt

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

Mailing Address 607 14th Street NW  
Suite 950

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: 60119.C405

Amount of Each Receipt this Period  
2500.00

Receipt

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 10000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |  |              |
|--|--|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:   | PAGE 36 / 71 |
|  | (check only one)   |              |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Restore America PAC, Inc.

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Union Pacific Fund for Effective Governm   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 / 21 / 2005 |  |
| Mailing Address 600 Thirteenth Street, NW<br>Suite 340  |   | <b>Transaction ID:</b> 60119.C408                          |  |
| City State Zip Code<br>Washington DC 20005  | Amount of Each Receipt this Period<br>3000.00         |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt  |  |
| Name of Employer<br><br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation<br><br>Aggregate Year-to-Date ▼<br>3000.00 |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> General Electric Company PAC   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>10 / 03 / 2005 |  |
| Mailing Address 1299 Pennsylvania Avenue, NW<br>Suite 1100  |   | <b>Transaction ID:</b> 60119.C452                          |  |
| City State Zip Code<br>Washington DC 20004-2407   | Amount of Each Receipt this Period<br>1000.00         |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt  |  |
| Name of Employer<br><br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation<br><br>Aggregate Year-to-Date ▼<br>2500.00 |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Navartis Political Action Committee  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 / 20 / 2005 |  |
| Mailing Address 701 Pennsylvania Ave., NW<br>Suite 725  |   | <b>Transaction ID:</b> 60119.C520                          |  |
| City State Zip Code<br>Washington DC 20004  | Amount of Each Receipt this Period<br>2500.00         |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt  |  |
| Name of Employer<br><br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation<br><br>Aggregate Year-to-Date ▼<br>5000.00 |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 6500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____   |

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

|  |   |   |
|--|---|---|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 37 / 71  |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
AFSA PAC

Mailing Address 919 Eighteenth Street NW

City State Zip Code  
Washington DC 20006-5517

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2005

Transaction ID: 60119.C406

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
WSWA Political Action Committee

Mailing Address 805 Fifteenth St. NW  
Suite 430

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2005

Transaction ID: 60119.C407

Amount of Each Receipt this Period  
3500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Independent Community Bankers PAC

Mailing Address One Thomas Circle, N.W.  
Suite 400

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 21 / 2005

Transaction ID: 60119.C409

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 5500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |  |              |
|--|--|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:   | PAGE 38 / 71 |
|  | (check only one)   |              |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Restore America PAC, Inc.

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Independent Community Bankers PAC</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 2 4 / 2 0 0 5 |  |
| Mailing Address One Thomas Circle, N.W.<br>Suite 400  |   | <b>Transaction ID:</b> 60119.C479                               |  |
| City State Zip Code<br>Washington DC 20005  | Amount of Each Receipt this Period<br>1000.00         |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |  |
| Name of Employer<br><br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation<br><br>Aggregate Year-to-Date ▼<br>2000.00 |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Owner Operator Ind. Drivers Assn. PAC</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 1 / 2 0 0 5 |  |
| Mailing Address 1101 30th Street N.W.   |   | <b>Transaction ID:</b> 60119.C410                               |  |
| City State Zip Code<br>Washington DC 20007  | Amount of Each Receipt this Period<br>1000.00         |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |  |
| Name of Employer<br><br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation<br><br>Aggregate Year-to-Date ▼<br>1000.00 |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Genesee &amp; Wyoming Inc. PAC</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 9 / 2 0 0 5 |  |
| Mailing Address 204 North George Street<br>Suite 230  |  | <b>Transaction ID:</b> 60119.C411                               |  |
| City State Zip Code<br>York PA 17401  | Amount of Each Receipt this Period<br>500.00         |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Receipt   |  |
| Name of Employer<br><br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation<br><br>Aggregate Year-to-Date ▼<br>500.00 |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____   |

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

|  |  |              |
|--|--|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:   | PAGE 39 / 71 |
|  | (check only one)   |              |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Restore America PAC, Inc.

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. American Council of Engineering Cos. PAC</b>                                   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 / 29 / 2005 |
| Mailing Address 1015 15th Street NW   |   | <b>Transaction ID: 60119.C412</b>                          |
| City Washington State DC Zip Code 20005   | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   | Receipt                                       |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Qualcomm, Inc. PAC</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 / 29 / 2005 |
| Mailing Address 2001 Pennsylvania Ave. N.W. Suite 650   |   | <b>Transaction ID: 60119.C416</b>                          |
| City Washington State DC Zip Code 20006   | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   | Receipt                                       |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Nickles Group PAC</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 / 29 / 2005 |
| Mailing Address 607 14th St. N.W. Suite 530   |   | <b>Transaction ID: 60119.C417</b>                          |
| City Washington State DC Zip Code 20005   | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   | Receipt                                       |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |  |              |
|--|--|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:   | PAGE 40 / 71 |
|  | (check only one)   |              |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Railamerica, Inc. Federal PAC

Mailing Address 5300 Broken Sound Blvd.

City State Zip Code  
Boca Raton FL 33487

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2005

Transaction ID: 60119.C418

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Checkfree Corp PAC

Mailing Address 4411 E. Jones Bridge Rd.

City State Zip Code  
Norcross GA 30092-1615

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2005

Transaction ID: 60119.C419

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 152 W. 57th Street  
42nd Floor

City State Zip Code  
New York NY 10019

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2005

Transaction ID: 60119.C420

Amount of Each Receipt this Period  
1500.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |  |              |
|--|--|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:   | PAGE 41 / 71 |
|  | (check only one)   |              |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Restore America PAC, Inc.

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Yahoo! Inc. PAC  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 / 29 / 2005 |
| Mailing Address 2000 Pennsylvania Ave. N.W.<br>Suite 4200   |   | Transaction ID: 60119.C421                                 |
| City State Zip Code<br>Washington DC 20006  | Amount of Each Receipt this Period<br>2000.00 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt  |
| Name of Employer  | Occupation                                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00           |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> BNSF RailPAC   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>08 / 01 / 2005 |
| Mailing Address P.O. Box 961039   |   | Transaction ID: 60119.C425                                 |
| City State Zip Code<br>Fort Worth TX 76161-0039   | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt  |
| Name of Employer  | Occupation                                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Bond PAC   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>08 / 01 / 2005 |
| Mailing Address 1399 New York Ave., NW  |   | Transaction ID: 60119.C426                                 |
| City State Zip Code<br>Washington DC 20005-4711   | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt  |
| Name of Employer  | Occupation                                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 4000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____   |

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

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

FOR LINE NUMBER: PAGE 42 / 71

(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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Honeywell International PAC

Mailing Address 1001 Pennsylvania Ave., NW  
Suite 700 S

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2005

Transaction ID: 60119.C427

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
The St. Paul Travelers Cos., Inc. PAC

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2005

Transaction ID: 60119.C428

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 2600 South River Road

City Des Plaines State IL Zip Code 60018-3286

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2005

Transaction ID: 60119.C429

Amount of Each Receipt this Period  
1000.00

Receipt

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

3000.00

**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 43 / 71  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
SIA-PAC

Mailing Address 1425 K Street NW  
7th Floor

City State Zip Code  
Washington DC 20005-3500

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: 60119.C434

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Cingular Wireless LLC Employee PAC

Mailing Address 5565 Glenridge Connector  
Suite 1700

City State Zip Code  
Atlanta GA 30342

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: 60119.C435

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
J.P. Morgan Chase & Co. PAC

Mailing Address 270 Park Avenue

City State Zip Code  
New York NY 10017

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: 60119.C436

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

**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 44 / 71  |
|  | <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)  
Restore America PAC, Inc.

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Upspac</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 8 / 1 6 / 2 0 0 5 |  |
| Mailing Address 55 Glenlake Parkway NE  |   | <b>Transaction ID: 60119.C437</b>                               |  |
| City Atlanta State GA Zip Code 30328  | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Citigroup Inc. PAC</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 8 / 2 3 / 2 0 0 5 |  |
| Mailing Address 1101 Pennsylvania Avenue NW Suite 1000  |   | <b>Transaction ID: 60119.C438</b>                               |  |
| City Washington State DC Zip Code 20004   | Amount of Each Receipt this Period<br>2000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>2000.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Citigroup Inc. PAC</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 2 / 3 0 / 2 0 0 5 |  |
| Mailing Address 1101 Pennsylvania Avenue NW Suite 1000  |   | <b>Transaction ID: 60119.C578</b>                               |  |
| City Washington State DC Zip Code 20004   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>3000.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 4000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 45 / 71 |
|  | <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)  
Restore America PAC, Inc.

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> The Financial Services Roundtable PAC                                      |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 2 3 / 2 0 0 5 |
| Mailing Address 1001 Pennsylvania Ave.<br>Suite 500 South   |   | Transaction ID: 60119.C439                                    |
| City Washington State DC Zip Code 20004   | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |
| Name of Employer  | Occupation                                    |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> InsurPac   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 2 3 / 2 0 0 5 |
| Mailing Address 412 First St. SE<br>Suite 300   |   | Transaction ID: 60119.C440                                    |
| City Washington State DC Zip Code 20003   | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |
| Name of Employer  | Occupation                                    |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> ASLRRA-PAC   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 9 / 3 0 / 2 0 0 5 |
| Mailing Address 50 F St. NW<br>Suite 7020   |   | Transaction ID: 60119.C443                                    |
| City Washington State DC Zip Code 20001-1507  | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |
| Name of Employer  | Occupation                                    |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3000.00     |
| <b>TOTAL</b> 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 46 / 71 |
|  | <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)  
Restore America PAC, Inc.

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Fannie Mae PAC   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 30 / 2005 |
| Mailing Address 3900 Wisconsin Avenue, NW   |   | Transaction ID: 60119.C444                               |
| City State Zip Code<br>Washington DC 20016  | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee.<br>C   | Receipt                                       |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Fannie Mae PAC   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>11 / 23 / 2005 |
| Mailing Address 3900 Wisconsin Avenue, NW   |   | Transaction ID: 60119.C502                               |
| City State Zip Code<br>Washington DC 20016  | Amount of Each Receipt this Period<br>2500.00 |  |
| FEC ID number of contributing federal political committee.<br>C   | Receipt                                       |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>3500.00           |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Natso Pac  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>10 / 03 / 2005 |
| Mailing Address 1737 King Street Suite 200  |   | Transaction ID: 60119.C453                               |
| City State Zip Code<br>Alexandria VA 22314  | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee.<br>C   | Receipt                                       |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 4500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |  |              |
|--|--|--------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   | PAGE 47 / 71 |
|  | (check only one)   |              |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Restore America PAC, Inc.

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. SAP America Inc. PAC</b> |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 0 3 / 2 0 0 5 |
| Mailing Address 3999 W. Chester Pike                                      |   | <b>Transaction ID: 60119.C454</b>                               |
| City State Zip Code<br>Newtown Square PA 19073-2305                       | FEC ID number of contributing federal political committee.<br><b>C</b>  | Amount of Each Receipt this Period<br>5000.00                   |
| Name of Employer Occupation   | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Receipt   |
| Aggregate Year-to-Date ▼<br>5000.00                                       |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. AOPA Pac</b> |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 0 3 / 2 0 0 5 |
| Mailing Address 421 Aviation Way                              |   | <b>Transaction ID: 60119.C455</b>                               |
| City State Zip Code<br>Frederick MD 21701                     | FEC ID number of contributing federal political committee.<br><b>C</b>  | Amount of Each Receipt this Period<br>3000.00                   |
| Name of Employer Occupation                                   | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Receipt   |
| Aggregate Year-to-Date ▼<br>3000.00                           |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Anla-pac</b> |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 0 3 / 2 0 0 5 |
| Mailing Address 1000 Vermont Ave.<br>3rd Floor                |   | <b>Transaction ID: 60119.C456</b>                               |
| City State Zip Code<br>Washington DC 20005                    | FEC ID number of contributing federal political committee.<br><b>C</b>  | Amount of Each Receipt this Period<br>1500.00                   |
| Name of Employer Occupation                                   | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Receipt   |
| Aggregate Year-to-Date ▼<br>1500.00                           |   |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 9500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 48 / 71 |
|  | <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)  
Restore America PAC, Inc.

|   |             |   |   |
|---|-------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Consumer Electronics Association PAC</b>                                       |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 0 7 / 2 0 0 5 |   |
| Mailing Address 2500 Wilson Blv d.  |             | <b>Transaction ID: 60119.C461</b>                             |   |
| City<br>Arlington   | State<br>VA | Zip Code<br>22201-3834  | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |             | Receipt   |   |
| Name of Employer  | Occupation  | Aggregate Year-to-Date ▼<br>1000.00                           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |   |   |

|   |             |   |   |
|---|-------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Direct Voice PAC</b>   |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 0 7 / 2 0 0 5 |   |
| Mailing Address 1111 19th St., NW Suite 1100  |             | <b>Transaction ID: 60119.C462</b>                             |   |
| City<br>Washington  | State<br>DC | Zip Code<br>20036-3603  | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |             | Receipt   |   |
| Name of Employer  | Occupation  | Aggregate Year-to-Date ▼<br>1000.00                           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |   |   |

|   |             |   |   |
|---|-------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. The Home Depot Inc. PAC</b>  |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 0 7 / 2 0 0 5 |   |
| Mailing Address 101 Constitution Ave NW Suite 800W  |             | <b>Transaction ID: 60119.C463</b>                             |   |
| City<br>Washington  | State<br>DC | Zip Code<br>20001   | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |             | Receipt   |   |
| Name of Employer  | Occupation  | Aggregate Year-to-Date ▼<br>1000.00                           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |   |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |   |
|--|---|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 49 / 71  |
|  | <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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Calpine Corporation PAC

Mailing Address 50 West San Fernando Street

City State Zip Code  
San Jose CA 95113

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: 60119.C467

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
United Transportation Union PAC

Mailing Address 14600 Detroit Avenue

City State Zip Code  
Lakewood OH 44107

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: 60119.C468

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address P.O. Box 2029

City State Zip Code  
Houston TX 77252-2029

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: 60119.C469

Amount of Each Receipt this Period  
1000.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |   |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 50 / 71                            |
|  | (check only one)             |   |
| <input type="checkbox"/> 11a   | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <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)  
Restore America PAC, Inc.

|   |                                     |   |  |
|---|-------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Stewpac</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 2 / 0 7 / 2 0 0 5 |  |
| Mailing Address P.O. Box 2029   |                                     | <b>Transaction ID: 60119.C506</b>                               |  |
| City<br>Houston   | State<br>TX                         | Zip Code<br>77252-2029  | Amount of Each Receipt this Period<br>500.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Receipt   |  |
| Name of Employer  | Occupation                          |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1500.00 |   |  |

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. VHA Political Action Committee</b>   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 2 5 / 2 0 0 5 |   |
| Mailing Address 220 E. Las Colinas Blvd.  |                                     | <b>Transaction ID: 60119.C481</b>                               |   |
| City<br>Irving  | State<br>TX                         | Zip Code<br>75039-5500  | Amount of Each Receipt this Period<br>1500.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Receipt   |   |
| Name of Employer  | Occupation                          |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1500.00 |   |   |

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. The Bluegrass Committee</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 1 / 1 5 / 2 0 0 5 |   |
| Mailing Address 400 North Capitol Street, NW<br>Suite 585   |                                     | <b>Transaction ID: 60119.C487</b>                               |   |
| City<br>Washington  | State<br>DC                         | Zip Code<br>20001   | Amount of Each Receipt this Period<br>5000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Receipt   |   |
| Name of Employer  | Occupation                          |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |   |

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

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

|  |  |              |
|--|--|--------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   | PAGE 51 / 71 |
|  | (check only one)   |              |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Restore America PAC, Inc.

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ARDA ROC-PAC</b>   |   | Date of Receipt<br>MM / DD / YYYY<br>11 / 15 / 2005 |
| Mailing Address 1201 15th Street N.W.<br>Suite 400  |   | <b>Transaction ID:</b> 60119.C488                   |
| City Washington State DC Zip Code 20005   | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   | Receipt                                       |   |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. OMelveny &amp; Myers Political Action Commi</b>                                |   | Date of Receipt<br>MM / DD / YYYY<br>11 / 15 / 2005 |
| Mailing Address 1625 I Street N.W.  |   | <b>Transaction ID:</b> 60119.C489                   |
| City Washington State DC Zip Code 20006-4061  | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   | Receipt                                       |   |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Paul, Hastings, Janofsky &amp; Walker PAC</b>                                  |   | Date of Receipt<br>MM / DD / YYYY<br>11 / 15 / 2005 |
| Mailing Address 515 South Flower Street<br>25th Floor   |   | <b>Transaction ID:</b> 60119.C490                   |
| City Los Angeles State CA Zip Code 90071  | Amount of Each Receipt this Period<br>2000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   | Receipt                                       |   |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>2000.00           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 4000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 52 / 71 |
|  | <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)  
Restore America PAC, Inc.

**A.** American Hospital Association PAC

Full Name (Last, First, Middle Initial)  
Mailing Address 325 Seventh Street, N.W.

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 7 | / | 2 | 0 | 0 | 5 |

**Transaction ID:** 60119.C495

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Deloitte & Touche Federal PAC

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 365

City Washington State DC Zip Code 20044-0365

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 9 | / | 2 | 0 | 0 | 5 |

**Transaction ID:** 60119.C496

Amount of Each Receipt this Period  
2000.00

Receipt

**C.** Government Is Not God PAC

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 77237

City Washington State DC Zip Code 20013

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 9 | / | 2 | 0 | 0 | 5 |

**Transaction ID:** 60119.C497

Amount of Each Receipt this Period  
500.00

Receipt

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |  |              |
|--|--|--------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   | PAGE 53 / 71 |
|  | (check only one)   |              |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Restore America PAC, Inc.

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CCA-PAC</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 1 / 2 1 / 2 0 0 5 |  |
| Mailing Address 10 Burton Hills Blvd.   |   | <b>Transaction ID:</b> 60119.C501                             |  |
| City State Zip Code<br>Nashville TN 37215   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Realtors PAC</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 1 / 2 3 / 2 0 0 5 |  |
| Mailing Address 430 N. Michigan Ave.  |   | <b>Transaction ID:</b> 60119.C503                             |  |
| City State Zip Code<br>Chicago IL 60611   | Amount of Each Receipt this Period<br>2000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>2000.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. U.S.-Cuba Democracy PAC</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 2 / 0 7 / 2 0 0 5 |  |
| Mailing Address 1200 W. 49th Street   |   | <b>Transaction ID:</b> 60119.C507                             |  |
| City State Zip Code<br>Hialeah FL 33012   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt   |  |
| Name of Employer Occupation   | Aggregate Year-to-Date ▼<br>1000.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 4000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |   |
|--|---|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 54 / 71  |
|  | <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)  
Restore America PAC, Inc.

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Campaign for Working Families</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 2 / 2 0 / 2 0 0 5 |   |
| Mailing Address 2800 S. Shirlington Rd.<br>Suite 930  |                                     | <b>Transaction ID:</b> 60119.C521                               |   |
| City<br>Arlington   | State<br>VA                         | Zip Code<br>22206   | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Receipt   |   |
| Name of Employer  | Occupation                          |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |   |

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Microsoft Corporation PAC</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 2 / 2 9 / 2 0 0 5 |   |
| Mailing Address 16011 NE 36th Way   |                                     | <b>Transaction ID:</b> 60119.C532                               |   |
| City<br>Redmond   | State<br>WA                         | Zip Code<br>98073-9717  | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Receipt   |   |
| Name of Employer  | Occupation                          |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |   |

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DLA Piper PAC</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 2 / 2 9 / 2 0 0 5 |   |
| Mailing Address 1200 19th Street NW   |                                     | <b>Transaction ID:</b> 60119.C535                               |   |
| City<br>Washington  | State<br>DC                         | Zip Code<br>20036   | Amount of Each Receipt this Period<br>2500.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Receipt   |   |
| Name of Employer  | Occupation                          |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00 |   |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 4500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | 9100.00 |

# 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 55 / 71

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)  
Restore America PAC, Inc.

|  |  |   |
|--|--|---|
| <b>A. Card Services</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address P.O. Box 219736<br>City Kansas City State MO Zip Code 64121-9736<br>Purpose of Disbursement CREDIT CARD: SEE BELOW<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID:</b> 60119.E720<br><b>Date of Disbursement:</b><br>M M / D D / Y Y Y Y<br>1 2 / 0 3 / 2 0 0 5<br>Amount of Each Disbursement this Period<br>3200.02<br>CREDIT CARD: SEE BELOW |
|--|--|---|

|   |  |   |
|---|--|---|
| <b>B. Nwa Airlines</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address<br>City State Zip Code -<br>Purpose of Disbursement TRAVEL<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID:</b> 60119.E724<br><b>Date of Disbursement:</b><br>M M / D D / Y Y Y Y<br>1 2 / 0 3 / 2 0 0 5<br>Amount of Each Disbursement this Period<br>542.90<br>[MEMO ITEM]<br>MEMO: TRAVEL |
|---|--|---|

|   |  |  |
|---|--|--|
| <b>C. US Airways</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address<br>City State Zip Code -<br>Purpose of Disbursement TRAVEL<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID:</b> 60119.E721<br><b>Date of Disbursement:</b><br>M M / D D / Y Y Y Y<br>1 2 / 0 3 / 2 0 0 5<br>Amount of Each Disbursement this Period<br>1318.30<br>[MEMO ITEM]<br>MEMO: TRAVEL |
|---|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 3200.02     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box] |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)  
Restore America PAC, Inc.

|  |  |  |
|--|--|--|
| <b>A. George Stafford</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 8215 Dearborn<br>City Shawnee Mission State KS Zip Code 66208-<br>Purpose of Disbursement TRAVEL REIMBURSEMENT<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: 60119.E689</b><br>Date of Disbursement<br>10 / 11 / 2005<br>Amount of Each Disbursement this Period<br>247.49<br>TRAVEL REIMBURSEMENT |
|--|--|--|

|   |  |  |
|---|--|--|
| <b>B. Patton Boggs LLP</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2550 M Street NW<br>City Washington State DC Zip Code 20037-1350<br>Purpose of Disbursement PROFESSIONAL FEE<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: 60119.E679</b><br>Date of Disbursement<br>07 / 07 / 2005<br>Amount of Each Disbursement this Period<br>504.00<br>PROFESSIONAL FEE |
|---|--|--|

|   |  |   |
|---|--|---|
| <b>C. Kansas Air Center, Inc.</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5490 Ft. Riley Blvd.<br>City Manhattan State KS Zip Code 66502-<br>Purpose of Disbursement TRAVEL<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: 60119.E686</b><br>Date of Disbursement<br>09 / 26 / 2005<br>Amount of Each Disbursement this Period<br>4414.03<br>TRAVEL |
|---|--|---|

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>5165.52</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Richardson Consulting, LLC</b>  |  | <b>Transaction ID:</b> 60119.E693<br>Date of Disbursement<br>10 / 11 / 2005 |
| Mailing Address 2100 M Street, NW #170-286   |  | Amount of Each Disbursement this Period<br>7006.00                          |
| City Washington State DC Zip Code 20037-   | COMMITTEE FUNDRAISING FEE & EXPENSE  |   |
| Purpose of Disbursement<br>COMMITTEE FUNDRAISING FEE & EXPENSE   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Shenandoah Services, LLC</b>  |  | <b>Transaction ID:</b> 60119.E715<br>Date of Disbursement<br>11 / 16 / 2005 |
| Mailing Address  |  | Amount of Each Disbursement this Period<br>752.00                           |
| City State Zip Code  | TRAVEL   |   |
| Purpose of Disbursement<br>TRAVEL  |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Ryan T. Carney</b>  |  | <b>Transaction ID:</b> 60119.E691<br>Date of Disbursement<br>10 / 11 / 2005 |
| Mailing Address 2001 North Adams Street #940   |  | Amount of Each Disbursement this Period<br>727.63                           |
| City Arlington State VA Zip Code 22201-  | TRAVEL REIMBURSEMENT; SEE BELOW  |   |
| Purpose of Disbursement<br>TRAVEL REIMBURSEMENT; SEE BELOW   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>8485.63</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Continental Airlines</b>                               |   | <b>Transaction ID:</b> 60721.E882<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 1 1 / 2 0 0 5 |
| Mailing Address   |   | Amount of Each Disbursement this Period<br><b>551.90</b>   |
| City  | State Zip Code  |  |
| Purpose of Disbursement<br>TRAVEL-HOUSTONTX.  |   | <b>[MEMO ITEM]</b><br>MEMO: TRAVEL-HOUSTONTX.  |
| Candidate Name  |   |  |
| Office Sought:  | Disbursement For:   |  |
| <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Richardson Consulting, LLC</b>                         |   | <b>Transaction ID:</b> 60119.E700<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 5 |
| Mailing Address 2100 M Street, NW #170-286  |   | Amount of Each Disbursement this Period<br><b>3083.25</b>  |
| City  | State Zip Code  |  |
| Purpose of Disbursement<br>FUNDRAISING EXPENSE REIMBURSEMENT  |   | FUNDRAISING EXPENSE REIMBURSEMENT  |
| Candidate Name  |   |  |
| Office Sought:  | Disbursement For:   |  |
| <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. U.S. Postmaster</b>                                    |   | <b>Transaction ID:</b> 60119.E716<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 1 6 / 2 0 0 5 |
| Mailing Address 424 S. Kansas Avenue  |   | Amount of Each Disbursement this Period<br><b>13.65</b>  |
| City  | State Zip Code  |  |
| Purpose of Disbursement<br>POSTAGE-OVERNIGHT  |   | POSTAGE-OVERNIGHT  |
| Candidate Name  |   |  |
| Office Sought:  | Disbursement For:   |  |
| <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |   |  |

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|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>3096.90</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |                |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Denise K Coatney</b>  |  | <b>Transaction ID: 60119.E728</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 2 / 0 8 / 2 0 0 5 |  |
| Mailing Address 877 E 550 Road   |  | Amount of Each Disbursement this Period<br>348.40   |  |
| City Lawrence State KS Zip Code 66047-   | Purpose of Disbursement<br>TRAVEL  | Category/<br>Type   |  |
| Candidate Name   | TRAVEL   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kansas Air Center, Inc.</b>   |  | <b>Transaction ID: 60119.E694</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 2 4 / 2 0 0 5 |  |
| Mailing Address 5490 Ft. Riley Blvd.   |  | Amount of Each Disbursement this Period<br>5916.98  |  |
| City Manhattan State KS Zip Code 66502-  | Purpose of Disbursement<br>TRAVEL  | Category/<br>Type   |  |
| Candidate Name   | TRAVEL   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. U.S. Postmaster</b>   |  | <b>Transaction ID: 60119.E685</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 9 / 0 7 / 2 0 0 5 |  |
| Mailing Address 424 S. Kansas Avenue   |  | Amount of Each Disbursement this Period<br>37.00  |  |
| City Topeka State KS Zip Code 66603-   | Purpose of Disbursement<br>POSTAGE   | Category/<br>Type   |  |
| Candidate Name   | POSTAGE  |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>6302.38</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box]    |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 71

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)  
Restore America PAC, Inc.

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. National Republican Senatorial Committee</b>  |  | <b>Transaction ID:</b> 60119.E733<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 2 / 2 7 / 2 0 0 5 |
| Mailing Address 42 2nd Street, NE  |  | Amount of Each Disbursement this Period<br>227.43  |
| City Washington State DC Zip Code 20002-   | Purpose of Disbursement<br>FAX SERVICE<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | FAX SERVICE  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Richardson Consulting, LLC</b>  |  | <b>Transaction ID:</b> 60119.E727<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 2 / 0 7 / 2 0 0 5 |
| Mailing Address 2100 M Street, NW #170-286   |  | Amount of Each Disbursement this Period<br>8322.23   |
| City Washington State DC Zip Code 20037-   | Purpose of Disbursement<br>COMMITTEE FUNDRAISING FEE & EXPENSE<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | COMMITTEE FUNDRAISING FEE & EXPENSE  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Rob Wasinger</b>  |  | <b>Transaction ID:</b> 60119.E730<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 2 / 1 7 / 2 0 0 5 |
| Mailing Address 10638 Timberidge Road  |  | Amount of Each Disbursement this Period<br>275.02  |
| City Fairfax Station State VA Zip Code 22039-  | Purpose of Disbursement<br>EXPENSE REIMBURSEMENT<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | EXPENSE REIMBURSEMENT  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 8824.68 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

|  |                                |  |
|--|--------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Ryan T. Carney</b>  |                                | <b>Transaction ID:</b> 60119.E732<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 2 / 1 9 / 2 0 0 5                 |
| Mailing Address 2001 North Adams Street #940   |                                | Amount of Each Disbursement this Period<br>528.31  |
| City Arlington State VA Zip Code 22201-  | TRAVEL REIMBURSEMENT:SEE BELOW |  |
| Purpose of Disbursement TRAVEL REIMBURSEMENT:SEE BELOW<br>Candidate Name   |                                | Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |                                | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. US Airways</b>  |   | <b>Transaction ID:</b> 60721.E883<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 2 / 1 9 / 2 0 0 5                 |
| Mailing Address  |   | Amount of Each Disbursement this Period<br>279.20  |
| City State Zip Code  | [MEMO ITEM]<br>MEMO: TRAVEL-LOS ANGELES TO WASHINGTONDC |  |
| Purpose of Disbursement TRAVEL-LOS ANGELES TO WASHINGTONDC<br>Candidate Name   |   | Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |        |  |
|--|--------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Kansas Air Center, Inc.</b>   |        | <b>Transaction ID:</b> 60119.E718<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 2 8 / 2 0 0 5                 |
| Mailing Address 5490 Ft. Riley Blvd.   |        | Amount of Each Disbursement this Period<br>893.50  |
| City Manhattan State KS Zip Code 66502-  | TRAVEL |  |
| Purpose of Disbursement TRAVEL<br>Candidate Name   |        | Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |        | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1421.81 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]     |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Citigroup Inc</b>   |  | <b>Transaction ID:</b> 60121.E745<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 7 / 1 3 / 2 0 0 5 |
| Mailing Address 850 3rd Avenue<br>13th Floor, Zone 1   |  | Amount of Each Disbursement this Period<br>493.30  |
| City New York State NY Zip Code 10022-   | ROOM RENTAL  |  |
| Purpose of Disbursement<br>ROOM RENTAL   |  | Category/<br>Type  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Ryan Ellis</b>  |  | <b>Transaction ID:</b> 60119.E729<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 2 / 1 2 / 2 0 0 5 |
| Mailing Address 1021 Arlington Blvd., #221   |  | Amount of Each Disbursement this Period<br>1138.00   |
| City Arlington State VA Zip Code 22209-  | BANQUET CHARGES  |  |
| Purpose of Disbursement<br>BANQUET CHARGES   |  | Category/<br>Type  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Richardson Consulting, LLC</b>  |  | <b>Transaction ID:</b> 60119.E697<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 2 5 / 2 0 0 5 |
| Mailing Address 2100 M Street, NW<br>#170-286  |  | Amount of Each Disbursement this Period<br>6000.00   |
| City Washington State DC Zip Code 20037-   | COMMITTEE FUNDRAISING FEE  |  |
| Purpose of Disbursement<br>COMMITTEE FUNDRAISING FEE   |  | Category/<br>Type  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>7631.30</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

|  |  |  |
|--|--|--|
| <b>A. Rob Wasinger</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 10638 Timberidge Road<br>City Fairfax Station State VA Zip Code 22039-  |  | <b>Transaction ID: 60119.E695</b><br>Date of Disbursement<br>10 / 24 / 2005<br>Amount of Each Disbursement this Period<br>228.22 |
| Purpose of Disbursement<br>EXPENSE REIMBURSEMENT<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Category/Type<br>EXPENSE REIMBURSEMENT   |

|   |  |  |
|---|--|--|
| <b>B. Patton Boggs LLP</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2550 M Street NW<br>City Washington State DC Zip Code 20037-1350   |  | <b>Transaction ID: 60119.E684</b><br>Date of Disbursement<br>09 / 07 / 2005<br>Amount of Each Disbursement this Period<br>517.18 |
| Purpose of Disbursement<br>PROFESSIONAL FEE<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Category/Type<br>PROFESSIONAL FEE  |

|  |  |   |
|--|--|---|
| <b>C. Ryan T. Carney</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2001 North Adams Street #940<br>City Arlington State VA Zip Code 22201-   |  | <b>Transaction ID: 60119.E717</b><br>Date of Disbursement<br>11 / 25 / 2005<br>Amount of Each Disbursement this Period<br>76.36 |
| Purpose of Disbursement<br>MEALS<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Category/Type<br>MEALS  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 821.76 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]    |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

|  |                      |  |
|--|----------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. George Stafford</b>   |                      | Transaction ID: 60119.E726<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 2 / 0 3 / 2 0 0 5                               |
| Mailing Address 8215 Dearborn  |                      | Amount of Each Disbursement this Period<br>171.04  |
| City Shawnee Mission State KS Zip Code 66208-  | TRAVEL REIMBURSEMENT |  |
| Purpose of Disbursement TRAVEL REIMBURSEMENT<br>Candidate Name   |                      | Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |                      | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |                                     |  |
|--|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Richardson Consulting, LLC</b>  |                                     | Transaction ID: 60119.E682<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 2 / 2 0 0 5                               |
| Mailing Address 2100 M Street, NW #170-286   |                                     | Amount of Each Disbursement this Period<br>10350.40  |
| City Washington State DC Zip Code 20037-   | COMMITTEE FUNDRAISING FEE & EXPENSE |  |
| Purpose of Disbursement COMMITTEE FUNDRAISING FEE & EXPENSE<br>Candidate Name  |                                     | Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |                                     | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |                  |  |
|--|------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Ryan T. Carney</b>  |                  | Transaction ID: 60119.E692<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 1 / 2 0 0 5                               |
| Mailing Address 2001 North Adams Street #940   |                  | Amount of Each Disbursement this Period<br>4583.33   |
| City Arlington State VA Zip Code 22201-  | PROFESSIONAL FEE |  |
| Purpose of Disbursement PROFESSIONAL FEE<br>Candidate Name   |                  | Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |                  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 15104.77    |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box] |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)  
Restore America PAC, Inc.

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Richardson Consulting, LLC</b>  |  | <b>Transaction ID:</b> 60119.E683<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 07 / 2005 |
| Mailing Address 2100 M Street, NW<br>#170-286  |  | Amount of Each Disbursement this Period<br>6041.77   |
| City Washington State DC Zip Code 20037-   | COMMITTEE FUNDRAISING FEE & EXPENSE  |  |
| Purpose of Disbursement<br>COMMITTEE FUNDRAISING FEE & EXPENSE   |  | Category/<br>Type  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Richardson Consulting, LLC</b>  |  | <b>Transaction ID:</b> 60119.E678<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 07 / 2005 |
| Mailing Address 2100 M Street, NW<br>#170-286  |  | Amount of Each Disbursement this Period<br>9171.56   |
| City Washington State DC Zip Code 20037-   | COMMITTEE FUNDRAISING FEE & EXPENSE  |  |
| Purpose of Disbursement<br>COMMITTEE FUNDRAISING FEE & EXPENSE   |  | Category/<br>Type  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Card Services</b>   |  | <b>Transaction ID:</b> 60119.E701<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 16 / 2005 |
| Mailing Address P.O. Box 219736  |  | Amount of Each Disbursement this Period<br>1507.84   |
| City Kansas City State MO Zip Code 64121-9736  | CREDIT CARD: SEE BELOW   |  |
| Purpose of Disbursement<br>CREDIT CARD: SEE BELOW  |  | Category/<br>Type  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 16721.17 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |          |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

|   |                |  |
|---|----------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Grand Hotel</b>  |                | Transaction ID: 60119.E706<br>Date of Disbursement<br>MM / DD / YYYY<br>11 / 16 / 2005 |
| Mailing Address   |                | Amount of Each Disbursement this Period<br>636.50                                      |
| City  | State Zip Code |  |
| Purpose of Disbursement<br>TRAVEL   | Candidate Name | Category/<br>Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                |  |
| State: District:  |                |  |

**[MEMO ITEM]**  
MEMO: TRAVEL

|   |                |  |
|---|----------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Office Max</b>   |                | Transaction ID: 60119.E703<br>Date of Disbursement<br>MM / DD / YYYY<br>11 / 16 / 2005 |
| Mailing Address   |                | Amount of Each Disbursement this Period<br>173.43                                      |
| City  | State Zip Code |  |
| Purpose of Disbursement<br>OFFICE SUPPLIES  | Candidate Name | Category/<br>Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                |  |
| State: District:  |                |  |

**[MEMO ITEM]**  
MEMO: OFFICE SUPPLIES

|   |                |  |
|---|----------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. US Airways</b>   |                | Transaction ID: 60119.E702<br>Date of Disbursement<br>MM / DD / YYYY<br>11 / 16 / 2005 |
| Mailing Address   |                | Amount of Each Disbursement this Period<br>314.20                                      |
| City  | State Zip Code |  |
| Purpose of Disbursement<br>TRAVEL   | Candidate Name | Category/<br>Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                |  |
| State: District:  |                |  |

**[MEMO ITEM]**  
MEMO: TRAVEL

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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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)  
Restore America PAC, Inc.

|   |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Ryan T. Carney</p> |   | <p><b>Transaction ID:</b> 60119.E699<br/><b>Date of Disbursement</b><br/> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p> |   | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 |  | 1 | 5 |  | 2 | 0 | 0 | 5 |
| M   | M   | /  | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1   | 1   |  | 1 | 5 |   | 2 | 0 | 0 | 5 |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Mailing Address 2001 North Adams Street<br/>#940</p>                     |   | <p>Amount of Each Disbursement this Period<br/> <table border="1"> <tr> <td>4</td><td>5</td><td>8</td><td>3</td><td>.</td><td>3</td><td>3</td> </tr> </table> </p>   |   | 4 | 5 | 8 | 3 | . | 3 | 3 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 4   | 5   | 8  | 3 | . | 3 | 3 |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>City Arlington State VA Zip Code 22201-</p>                              | <p>Purpose of Disbursement<br/>PROFESSIONAL FEE</p>   | <p>Category/<br/>Type</p>  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Candidate Name</p>   | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>                 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br/>                 State: District:</p> |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Rob Wasinger</p>   |   | <p><b>Transaction ID:</b> 60119.E698<br/><b>Date of Disbursement</b><br/> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p> |   | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 2 | 5 |  | 2 | 0 | 0 | 5 |
| M   | M   | /  | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1   | 0   |  | 2 | 5 |   | 2 | 0 | 0 | 5 |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Mailing Address 10638 Timberidge Road</p>                                |   | <p>Amount of Each Disbursement this Period<br/> <table border="1"> <tr> <td>2</td><td>1</td><td>0</td><td>.</td><td>6</td><td>1</td> </tr> </table> </p>   |   | 2 | 1 | 0 | . | 6 | 1 |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 2   | 1   | 0  | . | 6 | 1 |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>City Fairfax Station State VA Zip Code 22039-</p>                        | <p>Purpose of Disbursement<br/>EXPENSE REIMBURSEMENT</p>  | <p>Category/<br/>Type</p>  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Candidate Name</p>   | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>                 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br/>                 State: District:</p> |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

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

**4793.94**

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

**81569.88**

**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 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)  
Restore America PAC, Inc.

|  |  |   |
|--|--|---|
| <p><b>A. Santorum 2006</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Santorum 2006</p> <p>Mailing Address One Tower Bridge Suite 1440</p> <p>City Conshohocken State PA Zip Code 19428-</p> <p>Purpose of Disbursement 2006 PRIMARY RICHARD SANTORUM US SE</p> <p>Candidate Name RICHARD J SANTORUM</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: PA District: 00</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> |  | <p><b>Transaction ID:</b> 60119.E711</p> <p>Date of Disbursement<br/>11 / 16 / 2005</p> <p>Amount of Each Disbursement this Period<br/>5000.00</p> <p>2006 PRIMARY RICHARD SANTORUM US SE</p> |
| <p><b>B. Friends of Conrad Burns</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Friends of Conrad Burns</p> <p>Mailing Address P.O. Box 1596</p> <p>City Helena State MT Zip Code 59624-</p> <p>Purpose of Disbursement 2006 MT SENATE</p> <p>Candidate Name CONRAD BURNS</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: MT District: 00</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                            |  | <p><b>Transaction ID:</b> 60119.E709</p> <p>Date of Disbursement<br/>11 / 16 / 2005</p> <p>Amount of Each Disbursement this Period<br/>5000.00</p> <p>2006 MT SENATE</p>                      |
| <p><b>C. Ed Bryant For Senate</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Ed Bryant For Senate</p> <p>Mailing Address 115 Penn Warren Drive Suite 300-309</p> <p>City Brentwood State TN Zip Code 37027-</p> <p>Purpose of Disbursement 2006 PRIMARY</p> <p>Candidate Name EDWARD G BRYANT</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: TN District: 00</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>        |  | <p><b>Transaction ID:</b> 60119.E719</p> <p>Date of Disbursement<br/>11 / 30 / 2005</p> <p>Amount of Each Disbursement this Period<br/>5000.00</p> <p>2006 PRIMARY</p>                        |

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

15000.00

**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)  
Restore America PAC, Inc.

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Jon Kyl For US Senate</b> |   | <b>Transaction ID: 60119.E713</b><br>Date of Disbursement<br>11 / 16 / 2005 |  |
| Mailing Address P.O. Box 10246   |   | Amount of Each Disbursement this Period<br>5000.00                          |  |
| City Phoenix<br>State AZ<br>Zip Code 85064-                                | Purpose of Disbursement<br>2006 PRIMARY   | Category/<br>Type   |  |
| Candidate Name<br>JON L KYL  | Office Sought: <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: AZ<br>District: 00  | 2006 PRIMARY  |   |  |

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mike DeWine For US Senate</b> |   | <b>Transaction ID: 60119.E712</b><br>Date of Disbursement<br>11 / 16 / 2005 |  |
| Mailing Address P.O. Box 340188  |   | Amount of Each Disbursement this Period<br>5000.00                          |  |
| City Columbus<br>State OH<br>Zip Code 43234-                                   | Purpose of Disbursement<br>2006 PRIMARY   | Category/<br>Type   |  |
| Candidate Name<br>RICHARD MICHAEL DEWINE                                       | Office Sought: <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: OH<br>District: 00  | 2006 PRIMARY  |   |  |

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Talent for Senate</b> |   | <b>Transaction ID: 60119.E710</b><br>Date of Disbursement<br>11 / 16 / 2005 |  |
| Mailing Address 147 N. Meramec<br>Suite 100                            |   | Amount of Each Disbursement this Period<br>5000.00                          |  |
| City Saint Louis<br>State MO<br>Zip Code 63105-                        | Purpose of Disbursement<br>2006 PRIMARY   | Category/<br>Type   |  |
| Candidate Name<br>JAMES MATTHES TALENT                                 | Office Sought: <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: MO<br>District: 00  | 2006 PRIMARY  |   |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | 30000.00 |

**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 70 / 71

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

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Christian Coalition of Iowa</b>   |   | <b>Transaction ID: 60119.E696</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 2 4 / 2 0 0 5 |  |
| Mailing Address P.O. Box 65066   |   | Amount of Each Disbursement this Period<br>500.00   |  |
| City West Des Moines<br>State IA<br>Zip Code 50265-  | Purpose of Disbursement<br>CONTRIBUTION   |   |  |
| Candidate Name   |   | Category/Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>Other |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Iowans For Nussle</b>   |  | <b>Transaction ID: 60119.E734</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 2 / 3 0 / 2 0 0 5 |  |
| Mailing Address 2335 70th Street   |  | Amount of Each Disbursement this Period<br>2000.00  |  |
| City Urbandale<br>State IA<br>Zip Code 50323-  | Purpose of Disbursement<br>CONTRIBUTION-GOV.IOWA   |   |  |
| Candidate Name   |  | Category/Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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

2500.00

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

2500.00

# 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)

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|                              |   |                              |                              |                             |                              |
|------------------------------|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22             | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input checked="" 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)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Emanuel J. Friedman

Mailing Address 2330 California St. NW

City Washington State DC Zip Code 20008-

Purpose of Disbursement  
Refund of Contribution Receipt on 2005 M

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 60119.E681

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="5000.00"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text" value="5000.00"/> |