

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
ORB PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">67951.31</td></tr></table>	67951.31
Y	Y	Y	Y									
2	0	0	7									
67951.31												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">67951.31</td></tr></table>	67951.31										
67951.31												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">64590.91</td></tr></table>	64590.91	<table border="1" style="width: 100%;"><tr><td align="right">64590.91</td></tr></table>	64590.91								
64590.91												
64590.91												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">132542.22</td></tr></table>	132542.22	<table border="1" style="width: 100%;"><tr><td align="right">132542.22</td></tr></table>	132542.22								
132542.22												
132542.22												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">70341.45</td></tr></table>	70341.45	<table border="1" style="width: 100%;"><tr><td align="right">70341.45</td></tr></table>	70341.45								
70341.45												
70341.45												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">62200.77</td></tr></table>	62200.77	<table border="1" style="width: 100%;"><tr><td align="right">62200.77</td></tr></table>	62200.77								
62200.77												
62200.77												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
ORB PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	43673.16	43673.16
(i) Itemized (use Schedule A)	20898.34	20898.34
(ii) Unitemized	64571.50	64571.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	64571.50	64571.50
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.)	19.41	19.41
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))	64590.91	64590.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	64590.91	64590.91

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	67500.00	67500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	2841.45	2841.45
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))..	70341.45	70341.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	70341.45	70341.45

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	64571.50	64571.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64571.50	64571.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. BRENT R R. COLLINS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1036689719215
Mailing Address 2225 W. Frye Road, #1112		Amount of Each Receipt this Period 1136.85
City Chandler State AZ Zip Code 85224	FEC ID number of contributing federal political committee. C	P/R Deduction (\$87.45 Bi-Weekly)
Name of Employer Orbital Sciences Corporation Occupation Deputy General Manager for Operations	Aggregate Year-to-Date ▼ 1136.85	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. WILLIAM D D. WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1079800119215
Mailing Address 48 WHITE PINE CIRCLE, #203		Amount of Each Receipt this Period 216.07
City STAFFORD State VA Zip Code 22554	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.60 Bi-Weekly)
Name of Employer Orbital Sciences Corporation Occupation Lead Designer	Aggregate Year-to-Date ▼ 216.07	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MIKLOS P P. KADAR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1079835919215
Mailing Address 158 OAK VIEW DRIVE, SE		Amount of Each Receipt this Period 260.00
City LEESBURG State VA Zip Code 20175	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporation Occupation Engineer	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1612.92
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 51
	<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)
ORB PAC

A. Full Name (Last, First, Middle Initial) MOSTAFA KIA Mailing Address 10570 E. BAHIA DRIVE City SCOTTSDALE State AZ Zip Code 85255 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1087191319215 Amount of Each Receipt this Period 260.00
Name of Employer Orbital Sciences Corporat- ion Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi- Weekly)

B. Full Name (Last, First, Middle Initial) MIKE LUCHT Mailing Address 1109 E. SCOTT AVENUE City GILBERT State AZ Zip Code 95234 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1087201819215 Amount of Each Receipt this Period 494.00
Name of Employer Orbital Sciences Corporat- ion Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	P/R Deduction (\$38.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial) TIMOTHY R R. LANE Mailing Address 1163 E. TOLEDO STREET City GILBERT State AZ Zip Code 85296 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1088405419215 Amount of Each Receipt this Period 230.75
Name of Employer Orbital Sciences Corporat- ion Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.75	P/R Deduction (\$17.75 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional)	984.75
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 8 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. DAVID J J. ADERHOLD		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 41600 SWIFTWATER DRIVE		Transaction ID: PR1131928019215
City State Zip Code LEESBURG VA 20176	Amount of Each Receipt this Period _____ 520.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 520.00	P/R Deduction (\$40.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) B. DAVID P P. STAIB JR., JR.		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6905 VANTAGE DRIVE		Transaction ID: PR1131940519215
City State Zip Code ALEXANDRIA VA 22306	Amount of Each Receipt this Period _____ 520.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation DIRECTOR, PROGRAM INTEGRATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 520.00	P/R Deduction (\$40.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) C. GREGORY A A. JONES		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7513 CANNON FORT DRIVE		Transaction ID: PR1150543719215
City State Zip Code CLIFTON VA 20124	Amount of Each Receipt this Period _____ 1235.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation VICE PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1235.00	P/R Deduction (\$95.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 2275.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 51
	<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)
ORB PAC

A. Full Name (Last, First, Middle Initial) NEIL A A. GARDNER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1234696819215	
Mailing Address 741 E. BUENA VISTA DRIVE		Amount of Each Receipt this Period 260.00	
City CHANDLER	State AZ	Zip Code 85249	P/R Deduction (\$20.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 260.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation VICE PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) AMY L L. PETERS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1244272719215	
Mailing Address 3142 E. HOPE STREET		Amount of Each Receipt this Period 507.00	
City MESA	State AZ	Zip Code 85213	P/R Deduction (\$39.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 507.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) ROBERT N N. YURICH		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1244945519215	
Mailing Address 1871 EAST HARRISON STREET		Amount of Each Receipt this Period 260.00	
City CHANDLER	State AZ	Zip Code 85225	P/R Deduction (\$20.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 260.00	
Name of Employer Orbital Sciences Corporat- ion	Occupation PROGRAM MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1027.00
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 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. THOMAS J. ITCHKAWICH		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 43412 SPERRIN COURT		Transaction ID: PR629553519215
City ASHBURN State VA Zip Code 20147	Amount of Each Receipt this Period _____ 520.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporation Occupation DIRECTOR	Aggregate Year-to-Date ▼ _____ 520.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JAMES B JUDD		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 16645 S. 27TH LANE		Transaction ID: PR629554519215
City PHOENIX State AZ Zip Code 85045	Amount of Each Receipt this Period _____ 836.68	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$64.36 Bi-Weekly)
Name of Employer Orbital Sciences Corporation Occupation VP	Aggregate Year-to-Date ▼ _____ 836.68	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JAMES H H. UTTER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 24607 S. ROCKER BROOK DRIVE		Transaction ID: PR629556519215
City SUN LAKES State AZ Zip Code 85248	Amount of Each Receipt this Period _____ 585.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$45.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporation Occupation DEPUTY GENERAL MANAGER	Aggregate Year-to-Date ▼ _____ 585.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1941.68
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 51
	<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)
ORBAC

Full Name (Last, First, Middle Initial) A. JOHN F F. MCCARTHY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629557319215
Mailing Address 1027 CHALLEDON RD.		Amount of Each Receipt this Period 462.02
City GREAT FALLS	State VA	Zip Code 22066
FEC ID number of contributing federal political committee. C		
Name of Employer Orbital Sciences Corporat- ion	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.02	P/R Deduction (\$35.54 Bi- Weekly)

Full Name (Last, First, Middle Initial) B. TIMOTHY E RUMFORD		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629561519215
Mailing Address 21023 POWDERHORNE COURT		Amount of Each Receipt this Period 362.67
City ASHBURN FARMS	State VA	Zip Code 22011
FEC ID number of contributing federal political committee. C		
Name of Employer Orbital Sciences Corporat- ion	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 362.67	P/R Deduction (\$28.01 Bi- Weekly)

Full Name (Last, First, Middle Initial) C. BARRON S. BENESKI		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629562419215
Mailing Address 43301 DOVETAIL PLACE		Amount of Each Receipt this Period 260.00
City ASHBURN	State VA	Zip Code 20147
FEC ID number of contributing federal political committee. C		
Name of Employer Orbital Sciences Corporat- ion	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	1084.69
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. WILLIAM DUCAS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629565219215
Mailing Address 16037 COPEN MEADOW DRIVE		Amount of Each Receipt this Period 352.12
City State Zip Code GAITHERSBURG MD 20878	FEC ID number of contributing federal political committee. C	P/R Deduction (\$27.52 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- Manager ion	Aggregate Year-to-Date ▼ 352.12	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. CHARLES WHITMEYER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629566919215
Mailing Address 895 W. Laurel Avenue		Amount of Each Receipt this Period 260.00
City State Zip Code Gilbert AZ 85233	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- VP ion	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ROBERT M. M. DEMME		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629567619215
Mailing Address 8410 NIGHTINGALE DRIVE		Amount of Each Receipt this Period 260.00
City State Zip Code LANHAM MD 20706	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- OPERATIONS MANAGER ion	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	872.12
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 13 / 51
	<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)
ORBAPAC

Full Name (Last, First, Middle Initial) A. JOSEPH M M. MAKOWSKI		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 6 WHITTINGHAM CIRCLE		Transaction ID: PR629576419215		
City State Zip Code STERLING VA 20165	Amount of Each Receipt this Period _____ 260.00		P/R Deduction (\$20.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____				
Name of Employer Orbital Sciences Corporat- ion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Manager Aggregate Year-to-Date ▼ _____ 260.00			

Full Name (Last, First, Middle Initial) B. RONALD J J. GRABE		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 2653 E. SCORPIO PLACE		Transaction ID: PR629576919215		
City State Zip Code CHANDLER AZ 85249	Amount of Each Receipt this Period _____ 975.00		P/R Deduction (\$75.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____				
Name of Employer Orbital Sciences Corporat- ion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation GENERAL MANAGER Aggregate Year-to-Date ▼ _____ 975.00			

Full Name (Last, First, Middle Initial) C. MARC D D GORDON		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 216 BOOKHAM LN.		Transaction ID: PR629578819215		
City State Zip Code GAITHERSBURG MD 20877	Amount of Each Receipt this Period _____ 437.84		P/R Deduction (\$33.68 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____				
Name of Employer Orbital Sciences Corporat- ion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Dir. Product Development Aggregate Year-to-Date ▼ _____ 437.84			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1672.84
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 14 / 51
	<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)
ORBAPAC

Full Name (Last, First, Middle Initial) A. JOSEPH I. DIMAGGIO		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3826 E. FARMDALE AVE		Transaction ID: PR629579519215
City MESA State AZ Zip Code 85206	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 260.00
Name of Employer: Orbital Sciences Corporation Occupation: MANAGER	Aggregate Year-to-Date 260.00	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. HOWARD D. D. SHORE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 5618 E. MARILYN ROAD		Transaction ID: PR629580519215
City SCOTTSDALE State AZ Zip Code 85254	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 520.00
Name of Employer: Orbital Sciences Corporation Occupation: Program Manager	Aggregate Year-to-Date 520.00	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CHRISTOPHER W. W. RICHMOND		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 313 SILVER CREST DR.		Transaction ID: PR629586819215
City WALKERSVILLE State MD Zip Code 21793	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 260.00
Name of Employer: Orbital Sciences Corporation Occupation: VP	Aggregate Year-to-Date 260.00	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1040.00
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 15 / 51
	<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)
ORB PAC

A. Full Name (Last, First, Middle Initial) MARK E E. BITTERMAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629588619215
Mailing Address 1835 BEULAH ROAD		Amount of Each Receipt this Period 520.00
City VIENNA State VA Zip Code 22182	FEC ID number of contributing federal political committee. C	P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: SVP	Aggregate Year-to-Date 520.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) PAUL N N. CAPOROSSI		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629589519215
Mailing Address 2506 IRON FORGE ROAD		Amount of Each Receipt this Period 260.00
City HERNDON State VA Zip Code 20171	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Manager	Aggregate Year-to-Date 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) SATYAPRASAD P. MAGANTY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629590319215
Mailing Address 4709 W. Carla Vista		Amount of Each Receipt this Period 422.63
City Chandler State AZ Zip Code 85226	FEC ID number of contributing federal political committee. C	P/R Deduction (\$32.51 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Director	Aggregate Year-to-Date 422.63	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1202.63
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 16 / 51
	<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)
ORB PAC

A. Full Name (Last, First, Middle Initial)
JAMES D D. EITNIER

Mailing Address 310 EASTFIELD PLACE

City State Zip Code
WALKERSVILLE MD 21793

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

Name of Employer Occupation
Orbital Sciences Corporat- SCIENTIST
ion

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

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

Transaction ID: PR629590519215

Amount of Each Receipt this Period
260.00

P/R Deduction (\$20.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
KARL M M. NOAH

Mailing Address 4919 Sutherland Drive

City State Zip Code
Frederick MD 21703

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

Name of Employer Occupation
Orbital Sciences Corporat- SR. MANAGER
ion

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 208.00

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

Transaction ID: PR629598219215

Amount of Each Receipt this Period
208.00

P/R Deduction (\$16.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
JOHN M M. DANKO

Mailing Address 1806 Millridge Ct.

City State Zip Code
ANNAPOLIS MD 21401

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

Name of Employer Occupation
Orbital Sciences Corporat- Sr. VP Science/Tech. Programs
ion

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 387.48

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

Transaction ID: PR629599619215

Amount of Each Receipt this Period
387.48

P/R Deduction (\$33.75 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	855.48
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: <input 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	PAGE 18 / 51
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NAME OF COMMITTEE (In Full)
ORB PAC

Full Name (Last, First, Middle Initial) A. JOSEPH W W. WHITACRE Jr., JR.		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 13523 Sanderling Place		Transaction ID: PR629611119215
City State Zip Code GERMANTOWN MD 20874	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 260.00
Name of Employer Orbital Sciences Corporation	Occupation VP and Chief Engineer	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. ROBERT T T. FECONDA		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 39000 FOX MANOR DRIVE		Transaction ID: PR629616819215
City State Zip Code LEESBURG VA 20175	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 260.00
Name of Employer Orbital Sciences Corporation	Occupation Manager	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. WILLIAM L L. PRICE JR., JR.		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 21378 Apple Grove Court		Transaction ID: PR629639419215
City State Zip Code Gaithersburg MD 20877	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.50
Name of Employer Orbital Sciences Corporation	Occupation DIRECTOR	P/R Deduction (\$38.50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.50	

SUBTOTAL of Receipts This Page (optional)	1020.50
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 19 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ORB PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL W w. MILLER

Mailing Address 10155 NIGHTINGALE ST

City State Zip Code
GAITHERSBURG MD 20882

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

Name of Employer Occupation
Orbital Sciences Corporat- VP
ion

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 601.77

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

Transaction ID: PR629647519215

Amount of Each Receipt this Period
601.77

P/R Deduction (\$46.29 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
MICHAEL D D. MOORE

Mailing Address 12272 Turkey Wing Court

City State Zip Code
Reston VA 20191

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

Name of Employer Occupation
Orbital Sciences Corporat- Engineer
ion

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

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

Transaction ID: PR629658619215

Amount of Each Receipt this Period
260.00

P/R Deduction (\$20.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
STEVEN A A MUMMA

Mailing Address 8048 Arcadian Shore Ct.

City State Zip Code
GAINESVILLE VA 20155

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

Name of Employer Occupation
Orbital Sciences Corporat- Director
ion

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

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

Transaction ID: PR629702519215

Amount of Each Receipt this Period
260.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1121.77

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 20 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. G. DAVID LOW		Date of Receipt
Mailing Address 20461 SWAN CREEK COURT		<input type="text"/> / <input type="text"/> / <input type="text"/>
City POTOMAC FALLS	State VA	Zip Code 20165
FEC ID number of contributing federal political committee.		Transaction ID: PR629702719215
Name of Employer Orbital Sciences Corporat- ion		Amount of Each Receipt this Period 650.00
Occupation VICE PRESIDENT		P/R Deduction (\$50.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. BRADLEY A A FIELDS		Date of Receipt
Mailing Address 25745 Howerton Drive		<input type="text"/> / <input type="text"/> / <input type="text"/>
City South Riding	State VA	Zip Code 20176
FEC ID number of contributing federal political committee.		Transaction ID: PR629710319215
Name of Employer Orbital Sciences Corporat- ion		Amount of Each Receipt this Period 260.00
Occupation Director		P/R Deduction (\$20.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. ROBERT T T. RICHARDS		Date of Receipt
Mailing Address 43280 OVERVIEW PLACE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City ASHBURN	State VA	Zip Code 20148
FEC ID number of contributing federal political committee.		Transaction ID: PR629710719215
Name of Employer Orbital Sciences Corporat- ion		Amount of Each Receipt this Period 650.00
Occupation VP		P/R Deduction (\$50.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional) ▶	1560.00
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 21 / 51
	<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)
ORB PAC

A. Full Name (Last, First, Middle Initial) DAVID W. W. THOMPSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629723919215
Mailing Address 11217 BRIGHT POND LANE		Amount of Each Receipt this Period 2496.00
City RESTON State VA Zip Code 20194	FEC ID number of contributing federal political committee. C	P/R Deduction (\$192.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: chairman and CEO	Aggregate Year-to-Date ▼ 2496.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) W. JEAN FLOYD		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629726019215
Mailing Address 843 W SHERRI DR		Amount of Each Receipt this Period 1350.18
City GILBERT State AZ Zip Code 85233	FEC ID number of contributing federal political committee. C	P/R Deduction (\$103.86 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: Prog Mgr	Aggregate Year-to-Date ▼ 1350.18	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) JR R. THOMPSON, JR.		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR629726819215
Mailing Address 416 Randolph Ave.		Amount of Each Receipt this Period 2496.00
City Huntsville State AL Zip Code 35801	FEC ID number of contributing federal political committee. C	P/R Deduction (\$192.00 Bi-Weekly)
Name of Employer: Orbital Sciences Corporation Occupation: President and COO	Aggregate Year-to-Date ▼ 2496.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	6342.18
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 22 / 51

(check only one)

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

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NAME OF COMMITTEE (In Full)
ORBPAC

Full Name (Last, First, Middle Initial) A. DONALD E E. THOMPSON		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y </div>	
Mailing Address 20848 GREAT FALLS FOREST DRIVE		Transaction ID: PR629726919215	
City STERLING	State VA	Zip Code 20165	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">500.50</div>
FEC ID number of contributing federal political committee. C			
Name of Employer Orbital Sciences Corporat- ion	Occupation MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">500.50</div>	P/R Deduction (\$38.50 Bi- Weekly)	

Full Name (Last, First, Middle Initial) B. DAVID HASTMAN		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y </div>	
Mailing Address 11614 S. APPALOOSA DR.		Transaction ID: PR629732819215	
City PHOENIX	State AZ	Zip Code 85044	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1016.09</div>
FEC ID number of contributing federal political committee. C			
Name of Employer Orbital Sciences Corporat- ion	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">1016.09</div>	P/R Deduction (\$78.46 Bi- Weekly)	

Full Name (Last, First, Middle Initial) C. CHARLES L L. RICHARDS		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y </div>	
Mailing Address 1433 EAST SARAGOSA STREET		Transaction ID: PR629744919215	
City CHANDLER	State AZ	Zip Code 85225	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">286.00</div>
FEC ID number of contributing federal political committee. C			
Name of Employer Orbital Sciences Corporat- ion	Occupation MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">286.00</div>	P/R Deduction (\$22.00 Bi- Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	<div style="border: 1px solid black; padding: 2px;">1802.59</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

**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 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. CAMILLE T T. CISEK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1468 W DEVON DR		Transaction ID: PR629747019215	
City GILBERT	State AZ	Zip Code 85233	Amount of Each Receipt this Period _____ 358.41 _____
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 358.41 _____	P/R Deduction (\$27.57 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. SUSAN M M. KNAPP		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 20700 Globe Mills Court		Transaction ID: PR629747419215	
City Ashburn	State VA	Zip Code 20147	Amount of Each Receipt this Period _____ 500.50 _____
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.50 _____	P/R Deduction (\$38.50 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. N PAUL BROST		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 18301 Mid Ocean Place		Transaction ID: PR629751819215	
City Leesburg	State VA	Zip Code 20176	Amount of Each Receipt this Period _____ 714.87 _____
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion	Occupation Sr. VP.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 714.87 _____	P/R Deduction (\$54.99 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	1573.78
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 24 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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)
ORBAPAC

Full Name (Last, First, Middle Initial) A. LARRY D D. BONS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1711 S. ASH STREET		Transaction ID: PR629759519215	
City State Zip Code GILBERT AZ 85233	Amount of Each Receipt this Period _____ 500.50		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion Occupation MANAGER	Aggregate Year-to-Date ▼ _____ 500.50		P/R Deduction (\$38.50 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. STEPHEN B B. THOMAS, JR.		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 365 E ARABIAN DR.		Transaction ID: PR629765519215	
City State Zip Code GILBERT AZ 85296	Amount of Each Receipt this Period _____ 520.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion Occupation DIRECTOR	Aggregate Year-to-Date ▼ _____ 520.00		P/R Deduction (\$40.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MICHAEL R R. PINKSTON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3829 W. LAREDO ST.		Transaction ID: PR629767619215	
City State Zip Code CHANDLER AZ 85226	Amount of Each Receipt this Period _____ 520.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Orbital Sciences Corporat- ion Occupation Deputy Program Manager	Aggregate Year-to-Date ▼ _____ 520.00		P/R Deduction (\$40.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1540.50
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 25 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. MARK OGREN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 541 E. MERRILL AVE		Transaction ID: PR629774419215
City State Zip Code GILBERT AZ 85234	Amount of Each Receipt this Period _____ 1574.56	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation Dir. Bus. Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1574.56	P/R Deduction (\$121.12 Bi- Weekly)

Full Name (Last, First, Middle Initial) B. BRIAN F. CLASS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 19932 Interlachen Circle		Transaction ID: PR629779919215
City State Zip Code ASHBURN VA 20147	Amount of Each Receipt this Period _____ 260.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 260.00	P/R Deduction (\$20.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) C. RICHARD S. STRAKA		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 14630 S. 14TH WAY		Transaction ID: PR629781119215
City State Zip Code PHOENIX AZ 85048	Amount of Each Receipt this Period _____ 390.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Orbital Sciences Corporat- ion Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 390.00	P/R Deduction (\$30.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 2224.56
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 26 / 51
	(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

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)
ORB PAC

Full Name (Last, First, Middle Initial) A. BRIAN T T. MULLET		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 1761 S NAVAJO WAY		Transaction ID: PR629788019215		
City State Zip Code CHANDLER AZ 85248	Amount of Each Receipt this Period _____ 260.00		P/R Deduction (\$20.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C		_____		
Name of Employer Orbital Sciences Corporat- ion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Prog. Mgr Aggregate Year-to-Date ▼ _____ 260.00	_____		

Full Name (Last, First, Middle Initial) B. MARK B B. CHAVEZ		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 3109 E. BIGHORN AVENUE		Transaction ID: PR629789319215		
City State Zip Code PHOENIX AZ 85048	Amount of Each Receipt this Period _____ 260.00		P/R Deduction (\$20.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C		_____		
Name of Employer Orbital Sciences Corporat- ion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation MANAGER Aggregate Year-to-Date ▼ _____ 260.00	_____		

Full Name (Last, First, Middle Initial) C. RONALD D D. WILEY		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 5551 W. GAIL DR.		Transaction ID: PR629789519215		
City State Zip Code CHANDLER AZ 85226	Amount of Each Receipt this Period _____ 520.00		P/R Deduction (\$40.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C		_____		
Name of Employer Orbital Sciences Corporat- ion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Sr. VP Aggregate Year-to-Date ▼ _____ 520.00	_____		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1040.00
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 28 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. TERRY R R. LUCHI		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1823 W. CANARY WAY		Transaction ID: PR629804319215
City State Zip Code CHANDLER AZ 85248	Amount of Each Receipt this Period _____ 520.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Orbital Sciences Corporat- ion Occupation MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 520.00	P/R Deduction (\$40.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) B. ALI E E ATIA		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10841 Willow Run Ct.		Transaction ID: PR629817719215
City State Zip Code POTOMAC MD 20854	Amount of Each Receipt this Period _____ 325.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Orbital Sciences Corporat- ion Occupation PRESIDENT, COMM. INTER.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 325.00	P/R Deduction (\$25.00 Bi- Weekly)

Full Name (Last, First, Middle Initial) C. WILLIAM J J. SCHUMACHER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 43985 Bruceton Mills Circle		Transaction ID: PR629820119215
City State Zip Code Ashburn VA 22011	Amount of Each Receipt this Period _____ 260.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Orbital Sciences Corporat- ion Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 260.00	P/R Deduction (\$20.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	1105.00
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 30 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. KAILASH C C. PANDE		Date of Receipt
Mailing Address 3178 E DESERT WILLOW ROAD		<input type="text"/> / <input type="text"/> / <input type="text"/>
City PHOENIX	State AZ	Zip Code 85048
FEC ID number of contributing federal political committee.		Transaction ID: PR629843719215
Name of Employer Orbital Sciences Corporat- ion		Amount of Each Receipt this Period
Occupation SCIENTIST		<input type="text"/> 500.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$38.50 Bi- Weekly)
Aggregate Year-to-Date ▼		
<input type="text"/> 500.50		

Full Name (Last, First, Middle Initial) B. JOHN G G. ZIERDT Jr., JR.		Date of Receipt
Mailing Address 608 EAGLES RIDGE PLACE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City HUNTSVILLE	State AL	Zip Code 35802
FEC ID number of contributing federal political committee.		Transaction ID: PR682730419215
Name of Employer Orbital Sciences Corporat- ion		Amount of Each Receipt this Period
Occupation VP, Huntsville Operations		<input type="text"/> 650.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$50.00 Bi- Weekly)
Aggregate Year-to-Date ▼		
<input type="text"/> 650.00		

Full Name (Last, First, Middle Initial) C. RICHARD L. MCGLOTHLIN		Date of Receipt
Mailing Address 119 MATT PHILLIPS ROAD		<input type="text"/> / <input type="text"/> / <input type="text"/>
City NASHVILLE	State AL	Zip Code 37220
FEC ID number of contributing federal political committee.		Transaction ID: PR682730719215
Name of Employer Orbital Sciences Corporat- ion		Amount of Each Receipt this Period
Occupation DIRECTOR		<input type="text"/> 260.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$20.00 Bi- Weekly)
Aggregate Year-to-Date ▼		
<input type="text"/> 260.00		

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> 1410.50
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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 31 / 51
	<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. ANTONIO L. ELIAS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760535519215
Mailing Address 7907 ARIEL WAY		Amount of Each Receipt this Period 500.50
City MCLEAN	State VA	Zip Code 22102
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.50 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation Exec. VP and GM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.50	

Full Name (Last, First, Middle Initial) B. PATRICK J. JENKINS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760535919215
Mailing Address 102 WINDOVER AVENUE		Amount of Each Receipt this Period 390.00
City VIENNA	State VA	Zip Code 22180
FEC ID number of contributing federal political committee. C		P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation SENIOR VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) C. GARRETT E. E. PIERCE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760539119215
Mailing Address 43468 CASTLE HARBOUR TERRACE		Amount of Each Receipt this Period 650.00
City LEESBURG	State VA	Zip Code 20176
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Orbital Sciences Corporat- ion	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional) ▶	1540.50
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 32 / 51
	(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)
ORBAPAC

Full Name (Last, First, Middle Initial) A. MICHAEL R R. WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 16958 HEATHER KNOLLS PLACE		Transaction ID: PR760539919215
City State Zip Code HAMILTON VA 20158	Amount of Each Receipt this Period _____ 650.00	
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$50.00 Bi-Weekly)	
Name of Employer Orbital Sciences Corporat- ion Occupation SVP	Aggregate Year-to-Date ▼ _____ 650.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JESSE F F. DOGGETT		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2425 S. EXTENSION ROAD		Transaction ID: PR760554019215
City State Zip Code MESA AZ 85210	Amount of Each Receipt this Period _____ 295.52	
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer Orbital Sciences Corporat- ion Occupation DIRECTOR	Aggregate Year-to-Date ▼ _____ 295.52	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ROBERT E WEBB		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2493 W. SPRICE DRIVE		Transaction ID: PR760575719215
City State Zip Code CHANDLER AZ 85248	Amount of Each Receipt this Period _____ 260.00	
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer Orbital Sciences Corporat- ion Occupation MANAGER	Aggregate Year-to-Date ▼ _____ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1205.52
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 33 / 51
	<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)
ORBAC

A. Full Name (Last, First, Middle Initial) RAYMOND P P. CROUGH Mailing Address 301 WEST 5TH STREET City State Zip Code FREDERICK MD 21701 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760579919215 Amount of Each Receipt this Period 500.50 P/R Deduction (\$38.50 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- Director ion Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.50		

B. Full Name (Last, First, Middle Initial) MICHAEL P P. DO Mailing Address 2723 RUSHING BROOK LANE City State Zip Code OAK HILL VA 20171 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760580219215 Amount of Each Receipt this Period 507.00 P/R Deduction (\$39.00 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- DIRECTOR ion Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 507.00		

C. Full Name (Last, First, Middle Initial) ANN C C. GRANDFIELD Mailing Address 405 MOOREFIELD ROAD City State Zip Code VIENNA VA 22180 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR760582119215 Amount of Each Receipt this Period 520.00 P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer Occupation Orbital Sciences Corporat- DIRECTOR ion Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 520.00		

SUBTOTAL of Receipts This Page (optional)	1527.50
TOTAL This Period (last page this line number only)	43673.16

**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 34 / 51

<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Webb for Senate		Transaction ID: 13545496 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 17427		Amount of Each Disbursement this Period 2000.00
City Arlington State VA Zip Code 22216	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. James Webb		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Sessions Senate Committee		Transaction ID: 13634012 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 7
Mailing Address PO Box 29576		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20017	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Jeff Sessions		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends Of Bud Cramer		Transaction ID: 13634011 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 7
Mailing Address P.O. Box 2621		Amount of Each Disbursement this Period 1000.00
City Huntsville State AL Zip Code 35804	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Robert (Bud) E. Cramer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 5	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
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)

PAGE 35 / 51

<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Tiahrt For Congress		Transaction ID: 13634013 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 7
Mailing Address 2250 N Rock Rd #118 A		Amount of Each Disbursement this Period 1000.00
City Wichita State KS Zip Code 67226	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Todd Tiahrt		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 4	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Reyes Committee, Inc., The		Transaction ID: 13713259 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address 1011 Montana Ave.		Amount of Each Disbursement this Period 1000.00
City El Paso State TX Zip Code 79901	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Silvestre Reyes		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 16	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Alan Mollohan For Congress Committee		Transaction ID: 13713258 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address P. O. Box 1343		Amount of Each Disbursement this Period 1000.00
City Fairmont State WV Zip Code 26555	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Alan B. Mollohan		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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)

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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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Mikulski for Senate		Transaction ID: 13726485 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 10 G Street, N.E. Suite 470		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement 011 Category/Type	
Candidate Name Barbara A. Mikulski	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 2	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ken Calvert For Congress		Transaction ID: 13726484 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22301	Purpose of Disbursement 011 Category/Type	
Candidate Name Ken Calvert	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 43	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Reyes Committee, Inc., The		Transaction ID: 13726483 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 1011 Montana Ave.		Amount of Each Disbursement this Period 1000.00
City El Paso State TX Zip Code 79901	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Silvestre Reyes	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 16	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Ellen Tauscher For Congress		Transaction ID: 13726480 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 20 Park Road, Suite E Suite E		Amount of Each Disbursement this Period 1000.00
City Burlingame State CA Zip Code 94010	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Ellen O. Tauscher	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Tom Davis For Congress		Transaction ID: 13769115 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 7
Mailing Address 6429 Downing Court		Amount of Each Disbursement this Period 1000.00
City Annandale State VA Zip Code 22003	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Thomas M. Davis, III	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Stevens for Senate Committee		Transaction ID: 13769099 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 7
Mailing Address P.O. Box 7024		Amount of Each Disbursement this Period 2500.00
City Arlington State VA Zip Code 22207	Purpose of Disbursement 011 Category/Type	
Candidate Name Ted Stevens	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Kay Granger Campaign Fund		Transaction ID: 13769102 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 7
Mailing Address 715 Jones Street Suite 101		Amount of Each Disbursement this Period 2500.00
City Fort Worth State TX Zip Code 76102	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Kay Granger		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 12	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Moran For Congress		Transaction ID: 13773021 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7
Mailing Address 44 Canal Center Plaza 2nd Floor		Amount of Each Disbursement this Period 2000.00
City Alexandria State VA Zip Code 22314	011 Category/ Type	
Purpose of Disbursement		
Candidate Name James P. Moran		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jo Ann Davis For Congress Inc.		Transaction ID: 13773020 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7
Mailing Address PO Box 1834		Amount of Each Disbursement this Period 1000.00
City Yorktown State VA Zip Code 23692	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Jo Ann S. Davis		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Terry Everett For Congress		Transaction ID: 13773022 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7
Mailing Address P.O. Box 1828		Amount of Each Disbursement this Period 1000.00
City Dothan State AL Zip Code 36302	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Terry Everett		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Sessions Senate Committee		Transaction ID: 13820356 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address PO Box 29576		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20017	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Jeff Sessions		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 2	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Thelma Drake For Congress		Transaction ID: 13840347 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address P.O. Box 61480		Amount of Each Disbursement this Period 1000.00
City Virginia Beach State VA Zip Code 23466	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Thelma Drake		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Ellen Tauscher For Congress		Transaction ID: 13840346 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address 20 Park Road, Suite E Suite E		Amount of Each Disbursement this Period 1000.00
City Burlingame State CA Zip Code 94010		
Purpose of Disbursement		011 Category/Type
Candidate Name Rep. Ellen O. Tauscher		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 10		

Full Name (Last, First, Middle Initial) B. Friends Of Dave Weldon		Transaction ID: 13921233 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address P.O. Boxs 16021		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22302		
Purpose of Disbursement		011 Category/Type
Candidate Name Dave Weldon		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 15		

Full Name (Last, First, Middle Initial) C. Mikulski for Senate		Transaction ID: 13917787 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 10 G Street, N.E. Suite 470		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement		011 Category/Type
Candidate Name Barbara A. Mikulski		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 2		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Mikulski for Senate		Transaction ID: 13919106 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 10 G Street, N.E. Suite 470		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20002	Purpose of Disbursement 011 Category/Type	
Candidate Name Barbara A. Mikulski	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 2	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ken Calvert For Congress		Transaction ID: 13920182 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22301	Purpose of Disbursement 011 Category/Type	
Candidate Name Ken Calvert	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 43	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Tiahrt For Congress		Transaction ID: 13920536 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 2250 N Rock Rd #118 A		Amount of Each Disbursement this Period 1000.00
City Wichita State KS Zip Code 67226	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Todd Tiahrt	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 4	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶

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

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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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Committee To Re-Elect Trent Franks To Congress		Transaction ID: 13922265 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 12416 N. 57th Drive		Amount of Each Disbursement this Period 1000.00
City Glendale State AZ Zip Code 85304		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Trent Franks		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mark Udall For Congress Inc.		Transaction ID: 13921704 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 8690 Wolff Court #200		Amount of Each Disbursement this Period 1000.00
City Westminster State CO Zip Code 80031		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Mark Udall		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hoyer For Congress		Transaction ID: 13922718 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 7905 Malcolm Road Suite 102		Amount of Each Disbursement this Period 2500.00
City Clinton State MD Zip Code 20735		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Steny H. Hoyer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 5	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

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

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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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Congressman Bart Gordon Committee		Transaction ID: 13987796 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address P.O. Box 2008		Amount of Each Disbursement this Period 1000.00
City Murfreesboro State TN Zip Code 37133	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Bart Gordon		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 6	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Frank Wolf		Transaction ID: 13994977 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 2501 Wisconsin Avenue, N.W. Number 304		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20007	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Frank R. Wolf		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 10	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kay Granger Campaign Fund		Transaction ID: 13994978 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 715 Jones Street Suite 101		Amount of Each Disbursement this Period 1000.00
City Fort Worth State TX Zip Code 76102	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Kay Granger		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 12	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶

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

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<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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Hall For Congress Committee (Ralph Hall - Rockwall)		Transaction ID: 13994976 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address Post Office Box 711		Amount of Each Disbursement this Period 1000.00
City Rockwall	State TX	
Zip Code 75087		011 Category/ Type
Purpose of Disbursement		
Candidate Name Rep. Ralph M. Hall		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 4	

Full Name (Last, First, Middle Initial) B. Kay Granger Campaign Fund		Transaction ID: 14027812 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 715 Jones Street Suite 101		Amount of Each Disbursement this Period 1000.00
City Fort Worth	State TX	
Zip Code 76102		011 Category/ Type
Purpose of Disbursement		
Candidate Name Rep. Kay Granger		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 12	

Full Name (Last, First, Middle Initial) C. Kay Granger Campaign Fund		Transaction ID: 14027811 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 715 Jones Street Suite 101		Amount of Each Disbursement this Period -1000.00
City Fort Worth	State TX	
Zip Code 76102		011 Category/ Type
Purpose of Disbursement Void - Kay Granger Campaign Fund		
Candidate Name Rep. Kay Granger		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 12	

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Mark Udall For Congress Inc.		Transaction ID: 14129741 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 8690 Wolff Court #200		Amount of Each Disbursement this Period 1000.00	
City Westminster State CO Zip Code 80031	Purpose of Disbursement 011 Category/ Type		
Candidate Name Rep. Mark Udall			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kirk For Congress		Transaction ID: 14129729 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address P.O. Box 8		Amount of Each Disbursement this Period 1000.00	
City Winnetka State IL Zip Code 60093	Purpose of Disbursement 011 Category/ Type		
Candidate Name Rep. Mark Steven Kirk			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. 2007 Senators' Classic Committee		Transaction ID: 14156143 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 1316 Alexandria Ave.		Amount of Each Disbursement this Period 7500.00	
City Alexandria State VA Zip Code 22308	Purpose of Disbursement 011 Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	9500.00
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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Culberson For Congress		Transaction ID: 14161549 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address P.O. Box 41964		Amount of Each Disbursement this Period 2000.00
City Houston State TX Zip Code 77241		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. John Abney Culberson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 7	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tom Davis For Congress		Transaction ID: 14245969 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address 6429 Downing Court		Amount of Each Disbursement this Period 2500.00
City Annandale State VA Zip Code 22003		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Thomas M. Davis, III		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends Of Dave Weldon		Transaction ID: 14245982 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address P.O. Boxes 16021		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22302		
Purpose of Disbursement	011 Category/Type	
Candidate Name Dave Weldon		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
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)

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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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Friends of Frank Wolf		Transaction ID: 14245968 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address 2501 Wisconsin Avenue, N.W. Number 304		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20007	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Frank R. Wolf		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 10	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. David Vitter For U.S. Senate		Transaction ID: 14245497 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address P.O. Box 8175		Amount of Each Disbursement this Period 1000.00
City Metairie State LA Zip Code 70011	011 Category/ Type	
Purpose of Disbursement		
Candidate Name David Vitter		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 2	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tiahrt For Congress		Transaction ID: 14245546 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address 2250 N Rock Rd #118 A		Amount of Each Disbursement this Period 2500.00
City Wichita State KS Zip Code 67226	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Todd Tiahrt		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 4	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
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)

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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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Committee To Re-Elect Trent Franks To Congress		Transaction ID: 14245957 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address 12416 N. 57th Drive		Amount of Each Disbursement this Period 1000.00
City Glendale State AZ Zip Code 85304		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Trent Franks		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Congressman Bart Gordon Committee		Transaction ID: 14245739 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address P.O. Box 2008		Amount of Each Disbursement this Period 2000.00
City Murfreesboro State TN Zip Code 37133		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Bart Gordon		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 6	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Giffords For Congress		Transaction ID: 14245980 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address PO Box 27565		Amount of Each Disbursement this Period 1000.00
City Tucson State AZ Zip Code 85726		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Gabrielle Giffords		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
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)

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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)
ORBPAC

Full Name (Last, First, Middle Initial) A. Ken Calvert For Congress		Transaction ID: 14282094 Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2007	
Mailing Address 104 Hume Avene		Amount of Each Disbursement this Period 1000.00	
City Alexandria State VA Zip Code 22301	Purpose of Disbursement	011 Category/ Type	
Candidate Name Ken Calvert		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 43		

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	67500.00

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 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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Jeannemarie Devolites Davis for State Senate		Transaction ID: 14129743 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address PO Box 936		Amount of Each Disbursement this Period 500.00
City Vienna State VA Zip Code 22183		
Purpose of Disbursement STATE SENATE VA	011 Category/Type	
Candidate Name Mrs Jeannemarie Devolites Davis		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	, STATE SENATE VA

Full Name (Last, First, Middle Initial) B. Mark Herring for VA State Senate		Transaction ID: 14161830 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 45195 Research Place, Suite 300		Amount of Each Disbursement this Period 1000.00
City Asburn State VA Zip Code 20147		
Purpose of Disbursement Mark Herring, STATE SENATE VA	011 Category/Type	
Candidate Name VA Sen. Mark Herring		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 33	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Mark Herring, STATE SENATE VA

Full Name (Last, First, Middle Initial) C. Cadin 2007		Transaction ID: 14246000 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address P.O. Box 710175		Amount of Each Disbursement this Period 750.00
City Oak Hill State VA Zip Code 20171		
Purpose of Disbursement Marc Cadin, STATE HOUSE VA	011 Category/Type	
Candidate Name Marc Cadin		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 67	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Marc Cadin, STATE HOUSE VA

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

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

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

FOR LINE NUMBER:
(check only one)

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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 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)
ORB PAC

Full Name (Last, First, Middle Initial) A. Mark Herring for VA State Senate		Transaction ID: 14282095
Mailing Address 45195 Research Place, Suite 300		Date of Disbursement 06 / 28 / 2007
City Asburn	State VA	Zip Code 20147
Purpose of Disbursement Mark Herring, STATE SENATE VA		Amount of Each Disbursement this Period 500.00
Candidate Name VA Sen. Mark Herring		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Mark Herring, STATE SENATE VA
State: VA	District: 33	

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	2750.00