



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**MasterCard International Inc. Employees' PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		71429.64
(b) Cash on Hand at Beginning of Reporting Period.....	87102.14	
(c) Total Receipts (from Line 19) .....	11157.83	135463.47
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	98259.97	206893.11
7. Total Disbursements (from Line 31).....	19567.50	128200.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	78692.47	78692.47
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**MasterCard International Inc. Employees' PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10465.33	118606.97
(ii) Unitemized .....	692.50	16856.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11157.83	135463.47
(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) .....	11157.83	135463.47
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (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))..... ▶	11157.83	135463.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11157.83	135463.47

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	67.50	1600.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	67.50	1600.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	126600.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	19567.50	128200.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19567.50	128200.64

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	11157.83	135463.47
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11157.83	135463.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	67.50	1600.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	67.50	1600.64

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

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

FOR LINE NUMBER: PAGE 6 OF 36  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Sheryl Andrasko**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
 O Fallon MO 63368-7263

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

Name of Employer Occupation  
 MasterCard VP/Information Tech

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-17-10-53**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. Tim Berger**

Mailing Address 2000 Purchase St

City State Zip Code  
 Purchase NY 10577-2405

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

Name of Employer Occupation  
 MasterCard Group Executive, Tax

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2700.00

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-39-10-53**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
 O Fallon MO 63368-7263

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

Name of Employer Occupation  
 MasterCard VP Technology Account Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 558.00

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-89-10-53**

Amount of Each Receipt this Period  
 62.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 462.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Ed Brandt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 Bellevue Pkwy  
 Ste 500  
 City State Zip Code  
 Wilmington DE 19809-3741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MasterCard General Manager, Chase  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-33-10-53**  
 Amount of Each Receipt this Period  
 150.00

**B. Angie Buss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City State Zip Code  
 O Fallon MO 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MasterCard VP/Systems Development  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-76-10-53**  
 Amount of Each Receipt this Period  
 50.00

**C. Jim Carrington**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City State Zip Code  
 Purchase NY 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MasterCard Global Product Group Executive, Global  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2025.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-8-10-53**  
 Amount of Each Receipt this Period  
 225.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	425.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 36  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Kevin Carroll**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Product Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-82-10-53**

Amount of Each Receipt this Period  
**150.00**

Full Name (Last, First, Middle Initial)  
**B. Joe Casale**

Mailing Address 100 Manhattanville Rd

City Purchase State NY Zip Code 10577-2134

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

Name of Employer MasterCard Occupation Business Leader, Product Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-38-10-53**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Finance Leader, Financial Analysis

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-91-10-53**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **325.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial) <b>A. Diane Dann</b>		Date of Receipt 09 / 15 / 2014 <b>Transaction ID : 20140911-57-10-53</b>
Mailing Address 2000 Purchase St		Amount of Each Receipt this Period 50.00
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MasterCard	Occupation VP/Counsel Sr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B. Colm Dobbyn</b>		Date of Receipt 09 / 15 / 2014 <b>Transaction ID : 20140911-56-10-53</b>
Mailing Address 2000 Purchase St		Amount of Each Receipt this Period 125.00
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer MasterCard	Occupation SVP/Asst. General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

Full Name (Last, First, Middle Initial) <b>C. Patrick Dwyer</b>		Date of Receipt 09 / 15 / 2014 <b>Transaction ID : 20140911-81-10-53</b>
Mailing Address 2000 Purchase St		Amount of Each Receipt this Period 26.00
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.00
Name of Employer MasterCard	Occupation VP/Consumer & Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael Ellison**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-68-10-53**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Tom Fauth**

Mailing Address 311 Briartree Ln

City Saint Louis State MO Zip Code 63129-5015

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

Name of Employer MasterCard Occupation Business Leader, Business Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 28 / 2014**

**Transaction ID : 405A9192A867A25DFA93**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**c. Marianne Fogarty**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Audit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-29-10-53**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Tucker Foote**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2020 12th St NW  
 Apt 704  
 City Washington State DC Zip Code 20009-7591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Business Leader, Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt  
 09 / 05 / 2014  
**Transaction ID : 433BB1778D0836289C58**  
 Amount of Each Receipt this Period  
 170.00

**B. Thomas Gannon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1401 I St NW  
 Ste 2  
 City Washington State DC Zip Code 20005-2225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Business Leader, Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-96-10-53**  
 Amount of Each Receipt this Period  
 140.00

**C. Ron Garrow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Group Head, Talent Acquisition, Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-9-10-53**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	510.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 36
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Bart Goldstein**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Head, Sec and Governance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-47-10-53**

Amount of Each Receipt this Period  
 25.00

**B. Julia Gosset**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 Manhattanville Rd

City Purchase State NY Zip Code 10577-2134

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

Name of Employer MasterCard Occupation Product Leader, Product Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-36-10-53**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Head, Technology Integration

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-1-10-53**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial) <b>A. Roger Griffith</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014 <b>Transaction ID : 20140911-61-10-53</b>		
Mailing Address 2000 Purchase St			Amount of Each Receipt this Period 100.00		
City Purchase	State NY	Zip Code 10577-2405			
FEC ID number of contributing federal political committee. C					
Name of Employer MasterCard		Occupation VP/Settlement			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00			

Full Name (Last, First, Middle Initial) <b>B. Maria Haluska</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014 <b>Transaction ID : 20140911-88-10-53</b>		
Mailing Address 2000 Purchase St			Amount of Each Receipt this Period 50.00		
City Purchase	State NY	Zip Code 10577-2405			
FEC ID number of contributing federal political committee. C					
Name of Employer MasterCard		Occupation Leader, Shareholder Services			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

Full Name (Last, First, Middle Initial) <b>C. Sherri Haymond</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014 <b>Transaction ID : 20140911-44-10-53</b>		
Mailing Address 2000 Purchase St			Amount of Each Receipt this Period 100.00		
City Purchase	State NY	Zip Code 10577-2405			
FEC ID number of contributing federal political committee. C					
Name of Employer MasterCard		Occupation Business Leader, Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 36
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Greg Howes**  
Full Name (Last, First, Middle Initial)

Mailing Address Remote

City Raleigh State NC Zip Code 27640-0001

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

Name of Employer MasterCard Occupation Global Solutions Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-60-10-53**

Amount of Each Receipt this Period  
**100.00**

**B. Ron Hynes**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Senior Business Leader, Product Manage

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2025.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-87-10-53**

Amount of Each Receipt this Period  
**225.00**

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

Mailing Address Remote

City Remote State TN Zip Code 37934

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

Name of Employer MasterCard Occupation Consultant, Business Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-51-10-53**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **350.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Fred Kaynor**  
Full Name (Last, First, Middle Initial)

Mailing Address 2999 Oak Rd  
Ste 1020

City Walnut Creek State CA Zip Code 94597-1983

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

Name of Employer MasterCard Occupation VP/Sponsorships

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  
09 / 15 / 2014  
**Transaction ID : 20140911-100-10-53**

Amount of Each Receipt this Period  
75.00

**B. Gary Kearns**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 Manhattanville Rd

City Purchase State NY Zip Code 10577-2134

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

Name of Employer MasterCard Occupation Group Executive, Information Services

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
09 / 15 / 2014  
**Transaction ID : 20140911-99-10-53**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Enhancement Stratg

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2610.00

Date of Receipt  
09 / 15 / 2014  
**Transaction ID : 20140911-63-10-53**

Amount of Each Receipt this Period  
290.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	665.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 36
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Beth Kitchener**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 Manhattanville Rd  
City Purchase State NY Zip Code 10577-2134  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation Bus Leader, Public Relations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2014  
**Transaction ID : 20140911-6-10-53**  
Amount of Each Receipt this Period 100.00

**B. Claire Le Gal**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2000 Purchase St  
City Purchase State NY Zip Code 10577-2405  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation Business Leader, Fraud Management  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2014  
**Transaction ID : 20140911-66-10-53**  
Amount of Each Receipt this Period 50.00

**C. Randall Leonard**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5555 Winghaven Blvd  
City O Fallon State MO Zip Code 63368-3625  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation VP/Systems Development  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2014  
**Transaction ID : 20140911-75-10-53**  
Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**MasterCard International Inc. Employees' PAC**

**A. Dana Lorberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation SVP/Global Operations Strategy  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1350.00**

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-28-10-53**  
 Amount of Each Receipt this Period  
**150.00**

**B. Michael Luchinsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation SBL Mergers & Acquisitions  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-18-10-53**  
 Amount of Each Receipt this Period  
**50.00**

**C. Raja Madabhushi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Chief Marketing Officer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1800.00**

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-86-10-53**  
 Amount of Each Receipt this Period  
**300.00**

**SUBTOTAL** of Receipts This Page (optional)..... **500.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 36
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Tara Maguire**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2000 Purchase St  
City Purchase State NY Zip Code 10577-2405  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation VP/Assistant Controller  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **2700.00**

Date of Receipt **09 / 15 / 2014**  
**Transaction ID : 20140911-101-10-53**  
Amount of Each Receipt this Period **300.00**

**B. Michael Manchisi**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5555 Winghaven Blvd  
City O Fallon State MO Zip Code 63368-3625  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation SVP/Operations  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **3744.00**

Date of Receipt **09 / 15 / 2014**  
**Transaction ID : 20140911-48-10-53**  
Amount of Each Receipt this Period **416.00**

**C. James Mandella**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2000 Purchase St  
City Purchase State NY Zip Code 10577-2405  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation Program Leader, Fraud Prevention Solut  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **450.00**

Date of Receipt **09 / 15 / 2014**  
**Transaction ID : 20140911-49-10-53**  
Amount of Each Receipt this Period **50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **766.00**  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 19 OF 36  
(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)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Kimberly Martin**

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-16-10-53**

Amount of Each Receipt this Period  
**40.00**

Full Name (Last, First, Middle Initial)  
**B. Carmen Matos**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Human Resources Leader, Staffing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-35-10-53**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 200 Bellevue Pkwy Ste 500

City Wilmington State DE Zip Code 19809-3741

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

Name of Employer MasterCard Occupation Account Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : 20140911-65-10-53**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **190.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 36
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Michael McEneny**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Deputy General Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2999.97

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2014

**Transaction ID : 20140911-69-10-53**

Amount of Each Receipt this Period  
333.33

**B. Chris McWilton**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Chief Financial Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3744.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2014

**Transaction ID : 20140911-79-10-53**

Amount of Each Receipt this Period  
416.00

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

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Product Leader, Product Account Suppor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2014

**Transaction ID : 20140911-94-10-53**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	799.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 36
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Shawn Miles**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2000 Purchase St  
City Purchase State NY Zip Code 10577-2405  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation VP/Counsel Sr  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **900.00**

Date of Receipt **09 / 15 / 2014**  
**Transaction ID : 20140911-34-10-53**  
Amount of Each Receipt this Period **100.00**

**B. Timothy Murphy**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2000 Purchase St  
City Purchase State NY Zip Code 10577-2405  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation Associate General Counsel  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **3744.00**

Date of Receipt **09 / 15 / 2014**  
**Transaction ID : 20140911-77-10-53**  
Amount of Each Receipt this Period **416.00**

**C. Ruby Naskiewicz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 239 Brookside Ave  
City Ridgewood State NJ Zip Code 07450-4630  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation Business Leader, Tax  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **900.00**

Date of Receipt **09 / 16 / 2014**  
**Transaction ID : 448989324199FF6D07AC**  
Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **616.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 36
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Nancy O'Malley**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Chf Pymt Sys Integrity Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-5-10-53**

Amount of Each Receipt this Period  
 150.00

**B. John Pagano**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Accounting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-50-10-53**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address Remote

City Remote State WI Zip Code 53708

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

Name of Employer MasterCard Occupation Account Leader - 501152

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-2-10-53**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 275.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Chris Pitcher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 Name of Employer MasterCard Occupation Finance Leader, Global Supply Manageme  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 15 / 2014  
**Transaction ID : 20140911-67-10-53**  
 Amount of Each Receipt this Period 30.00

**B. Steve Potter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9830 Colonnade Blvd Ste 170  
 City San Antonio State TX Zip Code 78230-2297  
 Name of Employer MasterCard Occupation Account Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2014  
**Transaction ID : 20140911-84-10-53**  
 Amount of Each Receipt this Period 100.00

**C. Mike Prusaczyk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 Name of Employer MasterCard Occupation Senior Business Leader, Software Engin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2014  
**Transaction ID : 20140911-64-10-53**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 230.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 36
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Rob Reeg**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Mastercard Blvd  
City O Fallon State MO Zip Code 63368-7263  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation SVP/Systems Development  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **3744.00**

Date of Receipt **09 / 15 / 2014**  
**Transaction ID : 20140911-19-10-53**  
Amount of Each Receipt this Period **416.00**

**B. Mike Rethorn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Mastercard Blvd  
City O Fallon State MO Zip Code 63368-7263  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation VP/Information Tech  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **900.00**

Date of Receipt **09 / 15 / 2014**  
**Transaction ID : 20140911-55-10-53**  
Amount of Each Receipt this Period **225.00**

**C. Leonard Sanker**  
Full Name (Last, First, Middle Initial)  
Mailing Address 424 Parkshire Place Dr  
City Dardenne Prairie State MO Zip Code 63368-8344  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation Business Leader, Software Engineering  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 20 / 2014**  
**Transaction ID : 4A7092DBEC1E731E01AC**  
Amount of Each Receipt this Period **50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **691.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Joe Schuler**  
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Leader, Systems Programming

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-41-10-53**

Amount of Each Receipt this Period  
**85.00**

**B. Eileen Simon**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-93-10-53**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 15 McGinnis St

City East Brunswick State NJ Zip Code 08816-2673

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

Name of Employer MasterCard Occupation Group Head, Portfolio Management - Mar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : 4F60AC9DD0872250D555**

Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>235.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 36
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Jack Sinnott**  
Full Name (Last, First, Middle Initial)

Mailing Address 801 Brickell Ave  
Ste 1200

City Miami State FL Zip Code 33131-2951

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

Name of Employer MasterCard Occupation Bus Leader, Sec & Risk Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
810.00

Date of Receipt  
09 / 15 / 2014  
**Transaction ID : 20140911-11-10-53**

Amount of Each Receipt this Period  
90.00

**B. Bella Stavchansky**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation General Manager, Eastern Europe

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
378.00

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : 20140911-103-10-53**

Amount of Each Receipt this Period  
42.00

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

Mailing Address 960 Grant Ave

City Pelham State NY Zip Code 10803-3115

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

Name of Employer MasterCard Occupation Senior Business Leader, Global Privacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
09 / 05 / 2014  
**Transaction ID : 279752D5DB538172B3D**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 632.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Joseph Swezey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Financial Analysis  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1116.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-13-10-53**  
 Amount of Each Receipt this Period  
 124.00

**B. Jason Taylor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Manhattanville Rd  
 City Purchase State NY Zip Code 10577-2134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Account Manager, Senior  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-4-10-53**  
 Amount of Each Receipt this Period  
 50.00

**C. Donna Terman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Bus Resources-Communication  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-30-10-53**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	324.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Stephen Treacy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Business Leader, Fraud Reporting and A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-22-10-53**  
 Amount of Each Receipt this Period  
 100.00

**B. Frank Tufano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Group Head Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2610.00

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-24-10-53**  
 Amount of Each Receipt this Period  
 290.00

**C. Timothy Tyler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-37-10-53**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	490.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Mark Valente**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Senior Business Leader, Tax  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-12-10-53**  
 Amount of Each Receipt this Period  
**50.00**

**B. Jeroen Van Erven**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 801 Brickell Ave Ste 1200  
 City Miami State FL Zip Code 33131-2951  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Financial Analysis  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1125.00**

Date of Receipt  
 09 / 30 / 2014  
**Transaction ID : 20140911-104-10-53**  
 Amount of Each Receipt this Period  
**125.00**

**C. Gary Vonderhaar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Systems Development  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2700.00**

Date of Receipt  
 09 / 15 / 2014  
**Transaction ID : 20140911-92-10-53**  
 Amount of Each Receipt this Period  
**300.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>475.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial) <b>A. Susan Warner</b>			Date of Receipt
Mailing Address 2000 Purchase St			M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014
City	State	Zip Code	<b>Transaction ID : 20140911-97-10-53</b>
Purchase	NY	10577-2405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer	Occupation		
MasterCard	Senior Business Leader, WorldWide Comm		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			1350.00
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Timothy Westendorf</b>			Date of Receipt
Mailing Address 2200 Mastercard Blvd			M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014
City	State	Zip Code	<b>Transaction ID : 20140911-58-10-53</b>
O Fallon	MO	63368-7263	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer	Occupation		
MasterCard	VP/Financial Systems		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			675.00
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Amy Winders</b>			Date of Receipt
Mailing Address 2200 Mastercard Blvd			M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014
City	State	Zip Code	<b>Transaction ID : 20140911-46-10-53</b>
O Fallon	MO	63368-7263	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer	Occupation		
MasterCard	Sr. Consultant, Technology Account Man		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			375.00
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	275.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Mimi Wood**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Human Resources  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1116.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-43-10-53**  
 Amount of Each Receipt this Period  
 124.00

**B. Kent Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Business Management  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : 20140911-54-10-53**  
 Amount of Each Receipt this Period  
 130.00

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	254.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10465.33

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

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

FOR LINE NUMBER:  
(check only one)

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

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)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address 411 King St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Merchant Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 6E95B8D9228D38D6C0C**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

**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)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Andy Barr for Congress, Inc.**

Mailing Address PO Box 2059

City Lexington State KY Zip Code 40588

Purpose of Disbursement  
2014 General

011

Candidate Name

**Garland Hale Barr IV**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: KY District: 06

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

**Transaction ID : CBF9B6C3B2DE68D6E8D**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Blaine for Congress**

Mailing Address PO Box 1025

City Jefferson City State MO Zip Code 65102

Purpose of Disbursement  
2014 General

011

Candidate Name

**W. Blaine Luetkemeyer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MO District: 03

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

**Transaction ID : 0DE21E022E4926A2D13**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Clarke for Congress**

Mailing Address 111-36 200Th. Street

City Hollis State NY Zip Code 11412

Purpose of Disbursement  
2014 General

011

Candidate Name

**Yvette Diana Clarke**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 09

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : A37272FB24CB3FF9F9B**

Amount of Each Disbursement this Period

1000.00

**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)

<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)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Del PAC**

Mailing Address 410 1 St, SE  
Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2014 Contribution

011

Category/  
Type

Candidate Name

**Del PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : F8652A42F3EF1461D93**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Empire Political Action Committee**

Mailing Address PO Box 15033

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2014 Contribution

011

Category/  
Type

Candidate Name

**Empire Political Action Committee**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

**Transaction ID : FABCB9A405445659E1F**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Friends for Gregory Meeks**

Mailing Address 153-01 Jamaica Ave. Suite 535

City Jamaica State NY Zip Code 11432

Purpose of Disbursement  
2014 General

011

Category/  
Type

Candidate Name

**Gregory W. Meeks**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Contribution**

State: NY District: 05

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2014

**Transaction ID : 632081E9BB91372BE30**

Amount of Each Disbursement this Period

2500.00

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

6500.00

**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)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Dennis Ross**

Mailing Address 133 South Harbor Drive

City Venice State FL Zip Code 34285

Purpose of Disbursement  
2014 General

011

Candidate Name

**Dennis A. Ross**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 15

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

**Transaction ID : 361B156A0518E7F876C**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Kind for Congress Committee**

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement  
2014 General

011

Candidate Name

**Ron Kind**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : A18A0C39AA39FFB0530**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Schock for Congress**

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement  
2014 General

011

Candidate Name

**Aaron Schock**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 18

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : E2B2A5E1B4C6D5CF78D**

Amount of Each Disbursement this Period

2500.00

**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)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Scott Garrett for Congress**

Mailing Address PO Box 905

City State Zip Code  
Newton NJ 07860

Purpose of Disbursement  
2014 General

011

Candidate Name

**Scott Garrett**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2014

**Transaction ID : 80EB45667E17C25574B**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Sean Patrick Maloney for Congress**

Mailing Address PO Box 270

City State Zip Code  
Newburgh NY 12550

Purpose of Disbursement  
2014 General

011

Candidate Name

**Sean Patrick Maloney**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2014

**Transaction ID : 4FA635B038CEA4D6D5F**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Stivers for Congress**

Mailing Address 4679 Winterset Drive

City State Zip Code  
Columbus OH 43220-8113

Purpose of Disbursement  
2014 General

011

Candidate Name

**Steve Stivers**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2014

**Transaction ID : 5105F44622055634A14**

Amount of Each Disbursement this Period

500.00

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

3500.00

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

19500.00