



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Indoor Tanning Association 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		40467.97
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	40467.97									
(c) Total Receipts (from Line 19) .....	12600.00	12600.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	53067.97	53067.97								
7. Total Disbursements (from Line 31) .....	7500.00	7500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	45567.97	45567.97								
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**

Write or Type Committee Name  
Indoor Tanning Association 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	12350.00	12350.00
(i) Itemized (use Schedule A) .....	250.00	250.00
(ii) Unitemized .....	12600.00	12600.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	12600.00	12600.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	12600.00	12600.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12600.00	12600.00

**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.....	7500.00	7500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7500.00	7500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	7500.00	7500.00

**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) .....	12600.00	12600.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12600.00	12600.00
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 / 13
	<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)  
Indoor Tanning Association PAC

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

Mailing Address 14 Jacobs Ln

City State Zip Code  
Whitman MA 02382-1440

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

Name of Employer Occupation  
Cosmedico Light, Inc. Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2007

Transaction ID: 70724.C604

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Karen Bentlage

Mailing Address 626 Surf Ave

City State Zip Code  
Stratford CT 06615-6728

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

Name of Employer Occupation  
Future Industries President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2007

Transaction ID: 70724.C595

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Steven B. Berkman

Mailing Address 213800 Senlac Dr. Ste 200

City State Zip Code  
Dallas TX 75234

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

Name of Employer Occupation  
Palm Beach Tan Senior Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 22 / 2007

Transaction ID: 70724.C589

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 13
	<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)  
Indoor Tanning Association PAC

**A.** Full Name (Last, First, Middle Initial)  
Brenda Fishbaugh

Mailing Address 10729 Coldwater Rd # 100

City State Zip Code  
Fort Wayne IN 46845-1238

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

Name of Employer EyePro Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2007

Transaction ID: 70724.C591

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jerry Frank

Mailing Address 43 Upton Street Unit 1

City State Zip Code  
Boston MA 02118

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

Name of Employer Cosmedico Light, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2007

Transaction ID: 70724.C601

Amount of Each Receipt this Period  
750.00

Receipt

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

Mailing Address 1430 W Auto Dr Ste 109

City State Zip Code  
Tempe AZ 85284-1034

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

Name of Employer Designer Skin Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2007

Transaction ID: 70724.C593

Amount of Each Receipt this Period  
2000.00

Receipt

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 13
	<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)  
Indoor Tanning Association PAC

**A.** Full Name (Last, First, Middle Initial)  
Janet R. Guilmette

Mailing Address 39 Oakhurst Road

City State Zip Code  
Scituate MA 02066

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

Name of Employer Occupation  
Cosmedico Light, Inc. Treasurer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
06 / 19 / 2007

Transaction ID: 70724.C603

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Penelope Harrison

Mailing Address 877 Auburnville Way Apt B-3

City State Zip Code  
Whitman MA 02382-1751

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

Name of Employer Occupation  
Cosmedico Light, Inc. Marketing Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
06 / 19 / 2007

Transaction ID: 70724.C602

Amount of Each Receipt this Period  
200.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
William J. Pipp

Mailing Address 7445 Company Drive

City State Zip Code  
Indianapolis IN 46278

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

Name of Employer Occupation  
Ets Inc. Vp Of Sales And Mktg

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
05 / 01 / 2007

Transaction ID: 70724.C592

Amount of Each Receipt this Period  
1500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 13
	<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)  
Indoor Tanning Association PAC

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

Mailing Address 911 Taylor Ave

City State Zip Code  
Shinrock OH 44839-2545

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

Name of Employer Occupation  
Tan Pro Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2007

Transaction ID: 70724.C597

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Chuck Robinson

Mailing Address P.O. Box 1308

City State Zip Code  
Paris TN 38242

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

Name of Employer Occupation  
Four Seasons Sales & Service Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2007

Transaction ID: 70724.C600

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 37 Robinson Blvd

City State Zip Code  
Orange CT 06477-3623

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

Name of Employer Occupation  
Light Sources, Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2007

Transaction ID: 70724.C599

Amount of Each Receipt this Period  
1000.00

Receipt

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 13
	<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)  
Indoor Tanning Association PAC

**A.** Full Name (Last, First, Middle Initial)  
Christian Sauska

Mailing Address 37 Robinson Blvd

City State Zip Code  
Orange CT 06477-3623

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

Name of Employer Occupation  
Light Sources, Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00

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

Transaction ID: 70724.C598

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jim Shepherd

Mailing Address 2550 American Ct

City State Zip Code  
Erlanger KY 41017-1548

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

Name of Employer Occupation  
Sperti Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

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

Transaction ID: 70724.C596

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 251 W Ridge Drive

City State Zip Code  
Canton GA 30114

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

Name of Employer Occupation  
Wolff System Technologies President

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 7

Transaction ID: 70724.C588

Amount of Each Receipt this Period  
1000.00

Receipt

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 13
	(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)  
Indoor Tanning Association PAC

**A.** Full Name (Last, First, Middle Initial)  
Chip Stroud

Mailing Address 705 Sunshive Way

City Greensboro State NC Zip Code 27409

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

Name of Employer American Sun Systems Occupation Board Member

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

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

Transaction ID: 70724.C594

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Burrell York

Mailing Address 1 Red Fox Rd

City North Hampton State NH Zip Code 03862-2050

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

Name of Employer Cosmedico Light, Inc. Occupation Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	7

Transaction ID: 70724.C607

Amount of Each Receipt this Period  
500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	12350.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 13

<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)  
Indoor Tanning Association PAC

Full Name (Last, First, Middle Initial) <b>A. McCrery for Congress</b>		Transaction ID: 70724.E98 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address PO Box 52956 333 Texas Street Suite 1900		Amount of Each Disbursement this Period 1000.00
City Shreveport State LA Zip Code 71135-2956	POLITICAL CONTRIBUTION	
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type
Candidate Name JAMES OTIS MCCRERY III		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Putnam for Congress</b>		Transaction ID: 70724.E97 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address PO Box 2257		Amount of Each Disbursement this Period 1000.00
City Bartow State FL Zip Code 33831-2257	POLITICAL CONTRIBUTION	
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type
Candidate Name ADAM H PUTNAM		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL 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>C. Friends of Rosa DeLauro</b>		Transaction ID: 70724.E96 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address 12 Trumbull St		Amount of Each Disbursement this Period 1000.00
City New Haven State CT Zip Code 06511-6311	POLITICAL CONTRIBUTION	
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type
Candidate Name ROSA DELAURO		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 13 / 13

<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)  
Indoor Tanning Association PAC

Full Name (Last, First, Middle Initial) <b>A. Friends of Jack Kingston</b>		Transaction ID: 70724.E99																					
Mailing Address PO Box 2133		Date of Disbursement																					
City Savannah State GA Zip Code 31402-2133		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	1		2	0	0	7														
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period																					
Candidate Name JOHN HEDDENS KINGSTON		<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>		2000.00																			
2000.00																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008																					
State: GA District: 01		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																					
		<input type="checkbox"/> Other (specify) ▼																					
		POLITICAL CONTRIBUTION																					

Full Name (Last, First, Middle Initial) <b>B. Tim Mahoney for Florida</b>		Transaction ID: 70724.E100																					
Mailing Address 4114 Northlake Blvd Ste 300		Date of Disbursement																					
City Palm Beach Gardens State FL Zip Code 33410-6281		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	6		2	0	0	7														
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period																					
Candidate Name TIM MAHONEY		<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>		2500.00																			
2500.00																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008																					
State: FL District: 16		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																					
		<input type="checkbox"/> Other (specify) ▼																					
		POLITICAL CONTRIBUTION																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>7500.00</b>