

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

White Mountain PAC

ADDRESS (number and street)

P.O. Box 1772

Check if different than previously reported. (ACC)

Concord NH 03302 1772

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00370932

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day Post-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

5. Covering Period 01 01 2007 through 06 30 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer H. Scott Flegal

Signature of Treasurer Electronically Filed by H. Scott Flegal Date 07 23 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
White Mountain 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		99605.66
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	99605.66									
(c) Total Receipts (from Line 19)	184107.11	184107.11								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	283712.77	283712.77								
7. Total Disbursements (from Line 31)	175319.78	175319.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	108392.99	108392.99								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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
White Mountain 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	42098.03	42098.03
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	42098.03	42098.03
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	141500.00	141500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	183598.03	183598.03
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)	9.08	9.08
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	500.00	500.00
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))	184107.11	184107.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	184107.11	184107.11

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	8912.91	8912.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	8912.91	8912.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	91000.00	91000.00
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.....	75406.87	75406.87
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))..	175319.78	175319.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	175319.78	175319.78

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)	183598.03	183598.03
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	183598.03	183598.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8912.91	8912.91
37. Offsets to Operating Expenditures (from Line 15, page 3)	9.08	9.08
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8903.83	8903.83

**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 / 54
	<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Andrew Athy, Jr.		Date of Receipt MM / DD / YYYY 03 / 15 / 2007
Mailing Address 1310 Nineteenth St., NW		Transaction ID: SA11A1.6104
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer O'Neill, Athy & Casey	Occupation Consultant	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Teresa W Ayers		Date of Receipt MM / DD / YYYY 05 / 30 / 2007
Mailing Address 425 North Cedar Brook Road		Transaction ID: SA11A1.6137
City Boulder	State CO	Zip Code 80304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Lea Berman		Date of Receipt MM / DD / YYYY 04 / 25 / 2007
Mailing Address 3055 Whitehaven Street, NW		Transaction ID: SA11A1.6167
City Washington	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	In-kind - 4/25 event
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 54
	<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Wayne L Berman		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 3055 Whitehaven St, NW		Transaction ID: SA11A1.6082
City Washington State DC Zip Code 20008	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Wayne L Berman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 3055 Whitehaven St, NW		Transaction ID: SA11A1.6133
City Washington State DC Zip Code 20008	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. Wayne L Berman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 3055 Whitehaven St, NW		Transaction ID: SA11A1.6165
City Washington State DC Zip Code 20008	Amount of Each Receipt this Period 848.03	
FEC ID number of contributing federal political committee. C	In-kind - 4/25 event	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2348.03		

SUBTOTAL of Receipts This Page (optional) ▶	2348.03
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 54
	<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Steven K Berry		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007
Mailing Address 3604 Annandale Rd		Transaction ID: SA11A1.6113
City State Zip Code Annandale VA 22003	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Wayne C Beyer		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007
Mailing Address 2501 Porter St NW No 527		Transaction ID: SA11A1.6108
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Chad Bradley		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2007
Mailing Address 406 Virginia Avenue		Transaction ID: SA11A1.6152
City State Zip Code Alexandria VI 22302	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Chad Bradley & Associates, L.L.C. Lobbyist	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 54
	<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)
White Mountain PAC

A. Full Name (Last, First, Middle Initial) Paul Cambon		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2007
Mailing Address 908 Croton Dr		Transaction ID: SA11A1.6114
City State Zip Code Alexandria VA 22308	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Livingston Group Director of Government Relations	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Martin Cancienne		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2007
Mailing Address P.O. Box 36 7075 Hwy 1 South		Transaction ID: SA11A1.6111
City State Zip Code Belle Rose LA 70341	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation The Livingston Group	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Johnson < Green		Date of Receipt M M / D D / Y Y Y Y Y 05 / 14 / 2007
Mailing Address 4450 Dexter St NW		Transaction ID: SA11A1.6154
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Ogilvy Government Relations Managing Director	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
White Mountain PAC

A. Full Name (Last, First, Middle Initial)
Stacey Hughes
 Mailing Address 314 N Garfield St
 City State Zip Code
 Arlington VA 22201-1231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 15 / 2007
Transaction ID: SA11A1.6105
 Amount of Each Receipt this Period
 2500.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Kathleen Clark Kies
 Mailing Address 6109 Franklin Park Road
 City State Zip Code
 McLean VA 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 26 / 2007
Transaction ID: SA11A1.6118
 Amount of Each Receipt this Period
 2500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Jeffrey J Kimbell
 Mailing Address 3504 Whitehaven Parkway NW
 City State Zip Code
 Washington DC 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kimbell & Associates Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 30 / 2007
Transaction ID: SA11A1.6139
 Amount of Each Receipt this Period
 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► **6000.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 54
	<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. J Paul Looney		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007
Mailing Address 640 W Timber Branch Parkway		Transaction ID: SA11A1.6107
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation WASHCAP Group Principal	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Gordon MacDougall		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2007
Mailing Address 3913 N Dunbarton St		Transaction ID: SA11A1.6136
City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Beacon Consulting Group President	Aggregate Year-to-Date 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Mark J Magliocchetti		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2007
Mailing Address 10203 Woodvale Pond Dr		Transaction ID: SA11A1.6156
City State Zip Code Fairfax Station VA 22039-1658	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation The PMA Group Associate	Aggregate Year-to-Date 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	8000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 54
	<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Andrew E. Manatos		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 1100 New Hampshire Ave, NW		Transaction ID: SA11A1.6134
City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. J Allen Martin		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 10095 Lawyers Road		Transaction ID: SA11A1.6117
City State Zip Code Vienna VA 22181	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation The Livingston Group, L.L.-C.	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Richard B Murphy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 6041 Woodmont Road		Transaction ID: SA11A1.6151
City State Zip Code Alexandria VA 22307	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation R B Murphy & Associates President	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	6500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 54
	<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Marjorie Strayer		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007	
Mailing Address 45 Carriage House Circle Road		Transaction ID: SA11A1.6116	
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Capitol Impact	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Linda E Tarplin		Date of Receipt M M / D D / Y Y Y Y 01 / 10 / 2007	
Mailing Address 1350 Eye Street NW Suite 690		Transaction ID: SA11A1.6075	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The OB-C Group Inc.	Occupation Principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. David F. Taylor		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007	
Mailing Address 708 W. Braddock Road		Transaction ID: SA11A1.6103	
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Capitol Solutions	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 54
	<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Jeffery M. Walter		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2007	
Mailing Address 508 Summers Court		Transaction ID: SA11A1.6110	
City State Zip Code Alexandria VA 22301	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The Walter Group	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. William H Zelif, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2007	
Mailing Address 499 S Capitol Street, SW Suite 600		Transaction ID: SA11A1.6115	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The Livingston Group, L.L.C.	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. George S. Zorich		Date of Receipt M M / D D / Y Y Y Y Y 05 / 22 / 2007	
Mailing Address 602 Academy Woods Drive		Transaction ID: SA11A1.6157	
City State Zip Code Lake Forest IL 60045-5118	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Kimball & Associates	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	42098.03

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. AMERICAN HOSPITAL ASSOCIATION PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007
Mailing Address 325 Seventh Street NW Suite 700		Transaction ID: SA11C.6089
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00106146	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007
Mailing Address 2 West Dixie Highway		Transaction ID: SA11C.6098
City State Zip Code Dania Beach FL 33004	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00027532	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007
Mailing Address 175 E. Houston Street Room 7-A-50		Transaction ID: SA11C.6120
City State Zip Code San Antonio TX 78205	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00109017	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	12000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 1300 North 17th Street Suite 1400		Transaction ID: SA11C.6130
City State Zip Code Arlington VA 22209	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00281212	Contribution	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA CORPORATION STATE AND FEDERAL POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 1100 N. King St. DE5-001-02-07 DE5-001-02-07		Transaction ID: SA11C.6086
City State Zip Code Wilmington DE 19884	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00043489	Contribution	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. BLUE PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address PO BOX 34676		Transaction ID: SA11C.6145
City State Zip Code WASHINGTON DC 20043	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00368480	Contribution	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional) ▶	12500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. CHUBB CORPORATION POLITICAL ACTION COMMITTEE-CHUBBPAC, THE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 15 Mountain View Road PO BOX 1651		Transaction ID: SA11C.6128
City Warren State NJ Zip Code 07059	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00229203		Contribution
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. COMCAST CORP. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 1500 Market Street 35th Floor		Transaction ID: SA11C.6123
City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00248716		Contribution
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CREDIT SUISSE SECURITIES (USA) GOVERNMENT ACTION FUND		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 1155 21st Street NW Suite 300		Transaction ID: SA11C.6147
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00111559		Contribution
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. DELTA DENTAL PLANS ASSOCIATION PAC		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 1515 W. 22ND STREET, SUITE 450		Transaction ID: SA11C.6078	
City State Zip Code Oak Brook IL 60523	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00213819	Contribution		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DIRECT VOICE THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7	
Mailing Address 1111 19TH STREET NW SUITE 1100		Transaction ID: SA11C.6088	
City State Zip Code WASHINGTON DC 20036	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C C00235309	Contribution		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7	
Mailing Address LILLY CORPORATE CENTER		Transaction ID: SA11C.6068	
City State Zip Code INDIANAPOLIS IN 46285	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00082792	Contribution		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	12000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address LILLY CORPORATE CENTER		Transaction ID: SA11C.6142
City State Zip Code INDIANAPOLIS IN 46285	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00082792	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 10000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. FMR Corp. PAC		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 82 Devonshire Street		Transaction ID: SA11C.6080
City State Zip Code Boston MA 02109	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00215046	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. FPL PAC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 700 Universe Blvd. P.O. Box 14000		Transaction ID: SA11C.6125
City State Zip Code Juno Beach FL 33408	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00064774	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 0 / 2 0 0 7
Mailing Address 1299 Pennsylvania Ave NW STE 1100		Transaction ID: SA11C.6073
City Washington State DC Zip Code 20004	FEC ID number of contributing federal political committee. C C00024869	Amount of Each Receipt this Period 2500.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 1299 Pennsylvania Ave NW STE 1100		Transaction ID: SA11C.6097
City Washington State DC Zip Code 20004	FEC ID number of contributing federal political committee. C C00024869	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
Aggregate Year-to-Date ▼ 7500.00		

Full Name (Last, First, Middle Initial) C. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 101 Constitution Avenue NW Suite 500 West		Transaction ID: SA11C.6093
City Washington State DC Zip Code 20001	FEC ID number of contributing federal political committee. C C00096156	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 54
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address 1750 NEW YORK NW		Transaction ID: SA11C.6067
City State Zip Code WASHINGTON DC 20006	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C70003108	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 1401 H STREET NW SUITE 1200		Transaction ID: SA11C.6077
City State Zip Code WASHINGTON DC 20005	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00105981	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JACOBS GOOD GOVERNMENT FUND OF JACOBS ENGINEERING GROUP INC.		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address 1111 South Arroyo Parkway		Transaction ID: SA11C.6069
City State Zip Code Pasadena CA 91105	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00142299	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. LIBERTY MUTUAL INSURANCE COMPANY-PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2007	
Mailing Address 175 Berkeley Steet		Transaction ID: SA11C.6094	
City State Zip Code Boston MA 02117		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00171843		Contribution	
Name of Employer Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 5000.00			

Full Name (Last, First, Middle Initial) B. LOCKHEED MARTIN EMPLOYEES' POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2007	
Mailing Address 1550 Crystal Drive Suite 300		Transaction ID: SA11C.6126	
City State Zip Code Arlington VA 22202		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00303024		Contribution	
Name of Employer Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 5000.00			

Full Name (Last, First, Middle Initial) C. MERCK & CO. INC. EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)		Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2007	
Mailing Address 601 Pennsylvania Ave. NW North Building Suite 1200		Transaction ID: SA11C.6131	
City State Zip Code Washington DC 20004		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00097485		Contribution	
Name of Employer Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. MGI PHARMA INC PAC		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2007	
Mailing Address 5775 WEST OLD SHAKOPEE RD STE 100		Transaction ID: SA11C.6143	
City State Zip Code BLOOMINGTON MN 55437	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C C00429886		Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. NACS POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007	
Mailing Address 1600 Duke Street		Transaction ID: SA11C.6091	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00126763		Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Oracle Corporation PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007	
Mailing Address 500 Oracle Parkway MS 50P6		Transaction ID: SA11C.6090	
City State Zip Code Redwood Shores CA 94065	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00323048		Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Oracle Corporation PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7
Mailing Address 500 Oracle Parkway MS 50P6		Transaction ID: SA11C.6141
City State Zip Code Redwood Shores CA 94065	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00323048		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 870 Winter Street		Transaction ID: SA11C.6099
City State Zip Code Waltham MA 02451	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00097568		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. SALLIE MAE INC POLITICAL ACTION COMMITTEE (SALLIE MAE PAC)		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 11600 SALLIE MAE DRIVE		Transaction ID: SA11C.6100
City State Zip Code RESTON VA 20193	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00331835		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. SONNENSCHN NATH & ROSENTHAL LLP POLITICAL ACTION COMMITTEE (SONNENSCHN PAC)		Date of Receipt M M / D D / Y Y Y Y Y 06 / 22 / 2007
Mailing Address 1301 K STREET NW SUITE 600 EAST TOWER		Transaction ID: SA11C.6162
City WASHINGTON State DC Zip Code 20005	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00216127		Contribution
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. The BC/BS Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2007
Mailing Address 1310 G Street, N.W.		Transaction ID: SA11C.6127
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00194746		Contribution
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. THERMO FISHER SCIENTIFIC INC. PAC		Date of Receipt M M / D D / Y Y Y Y Y 05 / 14 / 2007
Mailing Address 81 Wyman Street PO Box 9046		Transaction ID: SA11C.6148
City Waltham State MA Zip Code 02454	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00292318		Contribution
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS INC.		Date of Receipt
Mailing Address 430 First St. SE		<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2007"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.6160
<input type="text" value="C"/> <input type="text" value="C00002881"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1000.00"/>
Occupation		Contribution
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT		Date of Receipt
Mailing Address 600 13th St. NW Suite 340		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.6084
<input type="text" value="C"/> <input type="text" value="C00010470"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="5000.00"/>
Occupation		Contribution
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS/VERIZON COMM INC PAC		Date of Receipt
Mailing Address 'VERIZON WIRELESS PAC' 180 WASHINGTON VALLEY ROAD		<input type="text" value="01"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
City	State	Zip Code
BEDMINSTER	NJ	07921
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.6072
<input type="text" value="C"/> <input type="text" value="C00363127"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="3000.00"/>
Occupation		Contribution
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="9000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS/VERIZON COMM INC PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007
Mailing Address 'VERIZON WIRELESS PAC' 180 WASHINGTON VALLEY ROAD		Transaction ID: SA11C.6124
City State Zip Code BEDMINSTER NJ 07921	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00363127		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00	

Full Name (Last, First, Middle Initial) B. VSS&P FEDPAC		Date of Receipt M M / D D / Y Y Y Y 01 / 30 / 2007
Mailing Address 52 E. Gay Street P.O. Box 1008		Transaction ID: SA11C.6070
City State Zip Code Columbus OH 43216	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00220764		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. WARNER MUSIC GROUP CORP PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2007
Mailing Address 75 ROCKEFELLER PLAZA		Transaction ID: SA11C.6095
City State Zip Code NEW YORK NY 10019	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00411074		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 54
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
White Mountain PAC

A. Full Name (Last, First, Middle Initial)
WELLPOINT INC. WELLPAC

Mailing Address 120 Monument Circle

City State Zip Code
Indianapolis IN 46204

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	7

Transaction ID: SA11C.6122

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	141500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 54
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input checked="" 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)
White Mountain PAC

A. Full Name (Last, First, Middle Initial)
TEAM SUNUNU

Mailing Address PO BOX 500

City RYE State NH Zip Code 03870

FEC ID number of contributing federal political committee. **C** C00370031

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2007

Transaction ID: SA16.6119

Amount of Each Receipt this Period
500.00

Contribution Refund

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

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 30 / 54

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: SB21B.6048 Date of Disbursement																					
Mailing Address P.O. Box 1758		<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>1</td><td></td><td>3</td><td>0</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	1		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	0		2	0	0	7														
City Newark	State NE	Zip Code 07101-1758	Amount of Each Disbursement this Period																				
Purpose of Disbursement Finance Charge		001	1.50																				
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:	[MEMO ITEM]																						

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: SB21B.6049 Date of Disbursement																					
Mailing Address P.O. Box 1758		<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>2</td><td>3</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		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	3		2	0	0	7														
City Newark	State NE	Zip Code 07101-1758	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment (see Memo)		001	5673.90																				
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: SB21B.6055 Date of Disbursement																					
Mailing Address P.O. Box 1758		<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>4</td><td></td><td>2</td><td>3</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	4		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	3		2	0	0	7														
City Newark	State NE	Zip Code 07101-1758	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment (see Memo)		001	199.69																				
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	5873.59
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 31 / 54

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: SB21B.6058 Date of Disbursement																					
Mailing Address P.O. Box 1758		<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>5</td><td></td><td>2</td><td>2</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	5		2	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	2		2	0	0	7														
City Newark	State NE	Zip Code 07101-1758	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment (see Memo)			<table border="1"><tr><td>361.60</td></tr></table>	361.60																			
361.60																							
Candidate Name			<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																			
001																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: SB21B.6061 Date of Disbursement																					
Mailing Address P.O. Box 1758		<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														
City Newark	State NE	Zip Code 07101-1758	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment (see Memo)			<table border="1"><tr><td>712.49</td></tr></table>	712.49																			
712.49																							
Candidate Name			<table border="1"><tr><td>003</td></tr></table> Category/ Type	003																			
003																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. Lea Berman		Transaction ID: SB21B.6169 Date of Disbursement																					
Mailing Address 3055 Whitehaven Street, NW		<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>4</td><td></td><td>2</td><td>5</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	4		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	5		2	0	0	7														
City Washington	State DC	Zip Code 20008	Amount of Each Disbursement this Period																				
Purpose of Disbursement In-kind - 4/25 event			<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																							
Candidate Name			<table border="1"><tr><td></td></tr></table> Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2074.09</td></tr></table>	2074.09
2074.09		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Wayne L Berman		Transaction ID: SB21B.6166 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 3055 Whitehaven St, NW		Amount of Each Disbursement this Period 848.03
City Washington State DC Zip Code 20008	Purpose of Disbursement In-kind - 4/25 event	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dell Catalog Sales, L.P.		Transaction ID: SB21B.6057 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 7
Mailing Address One Dell Way		Amount of Each Disbursement this Period 39.79
City Round Rock State TX Zip Code 78682	Purpose of Disbursement Administrative Expense	
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Irving Bluecanoe		Transaction ID: SB21B.6054 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 73 Lafayette Rd		Amount of Each Disbursement this Period 26.89
City North Hampton State NH Zip Code 03862	Purpose of Disbursement Travel Expense	
Candidate Name		Category/Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	848.03
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 33 / 54

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Network Solutions		Transaction ID: SB21B.6059 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 7
Mailing Address Elm Street		Amount of Each Disbursement this Period 361.60
City Manchester State NH Zip Code 03101	[MEMO ITEM]	
Purpose of Disbursement Administration Expense Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. NH Liquor Store #68		Transaction ID: SB21B.6064 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 69 Lafayette Road		Amount of Each Disbursement this Period 319.99
City North Hampton State NH Zip Code 03862	[MEMO ITEM]	
Purpose of Disbursement Political Event Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: SB21B.6056 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 76 Ft Eddy Plaza		Amount of Each Disbursement this Period 159.90
City Concord State NH Zip Code 03301	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 34 / 54

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. The Caucus Room		Transaction ID: SB21B.6051 Date of Disbursement																				
Mailing Address Market Square North 401 9th St, NW		<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>2</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	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	2		2	0	0	7													
City Washington	State DC	Zip Code 20001																				
Purpose of Disbursement Political Fundraising Event		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>5647.01</td></tr></table>	5647.01																			
5647.01																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:	District:																					

Full Name (Last, First, Middle Initial) B. The Caucus Room		Transaction ID: SB21B.6046 Date of Disbursement																				
Mailing Address Market Square North 401 9th St, NW		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>8</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	1	2		0	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	8		2	0	0	7													
City Washington	State DC	Zip Code 20001																				
Purpose of Disbursement Political Luncheon		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>115.70</td></tr></table>	115.70																			
115.70																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:	District:																					

Full Name (Last, First, Middle Initial) C. The Cranberry Bog		Transaction ID: SB21B.6062 Date of Disbursement																				
Mailing Address 29 Lafayette Road		<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>5</td><td></td><td>1</td><td>4</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	5		1	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	4		2	0	0	7													
City North Hampton	State NH	Zip Code 03862																				
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>392.50</td></tr></table>	392.50																			
392.50																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:	District:																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td>8795.71</td></tr></table>	8795.71
8795.71		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 35 / 54

<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. BOB SCHAFFER FOR US SENATE		Transaction ID: SB23.6038 Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2007
Mailing Address 1777 HARRISON ST SUITE 100		Amount of Each Disbursement this Period 5000.00
City DENVER State CO Zip Code 80210	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) B. CHAMBLISS FOR SENATE		Transaction ID: SB23.6041 Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2007
Mailing Address POST OFFICE BOX 12469		Amount of Each Disbursement this Period 5000.00
City ATLANTA State GA Zip Code 30355	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. COLEMAN FOR SENATE 08		Transaction ID: SB23.6030 Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2007
Mailing Address 7300 HUDSON BLVD SUITE 270A		Amount of Each Disbursement this Period 5000.00
City ST PAUL State MN Zip Code 55128	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. COLEMAN FOR SENATE 08		Transaction ID: SB23.6032 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address 7300 HUDSON BLVD SUITE 270A		Amount of Each Disbursement this Period 5000.00
City ST PAUL State MN Zip Code 55128	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. COLLINS FOR SENATOR		Transaction ID: SB23.6017 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address PO BOX 1096		Amount of Each Disbursement this Period 5000.00
City BANGOR State ME Zip Code 04402	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. COLLINS FOR SENATOR		Transaction ID: SB23.6019 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address PO BOX 1096		Amount of Each Disbursement this Period 5000.00
City BANGOR State ME Zip Code 04402	Purpose of Disbursement Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. ELIZABETH DOLE COMMITTEE INC		Transaction ID: SB23.6021 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address PO BOX 2918		Amount of Each Disbursement this Period 5000.00
City RALEIGH State NC Zip Code 27602	011 Category/Type	
Purpose of Disbursement Contribution Candidate Name		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00		

Full Name (Last, First, Middle Initial) B. ELIZABETH DOLE COMMITTEE INC		Transaction ID: SB23.6023 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address PO BOX 2918		Amount of Each Disbursement this Period 5000.00
City RALEIGH State NC Zip Code 27602	011 Category/Type	
Purpose of Disbursement Contribution Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00		

Full Name (Last, First, Middle Initial) C. FRIENDS OF GORDON SMITH		Transaction ID: SB23.6027 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address 228 S WASHINGTON STE 115		Amount of Each Disbursement this Period 5000.00
City ALEXANDRIA State VA Zip Code 22314	011 Category/Type	
Purpose of Disbursement Contribution Candidate Name		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00		

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 54

<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. FRIENDS OF GORDON SMITH		Transaction ID: SB23.6029 Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2007
Mailing Address 228 S WASHINGTON STE 115		Amount of Each Disbursement this Period 5000.00
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. GRAHAM FOR SENATE		Transaction ID: SB23.6036 Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2007
Mailing Address 199 WEALTHA AVE		Amount of Each Disbursement this Period 5000.00
City WATERTOWN State NY Zip Code 13601	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. JEB BRADLEY FOR CONGRESS		Transaction ID: SB23.6040 Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2007
Mailing Address 645 South Main Street		Amount of Each Disbursement this Period 1000.00
City Wolfeboro State NH Zip Code 03894	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

11000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 39 / 54

<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE		Transaction ID: SB23.6015 Date of Disbursement
Mailing Address 425 SECOND STREET NE		<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="15000.00"/>

Full Name (Last, First, Middle Initial) B. Roberts for Senate		Transaction ID: SB23.6033 Date of Disbursement
Mailing Address P.O. Box 433		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
City Great Bend	State IN	Zip Code 67530
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) C. Roberts for Senate		Transaction ID: SB23.6035 Date of Disbursement
Mailing Address P.O. Box 433		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
City Great Bend	State IN	Zip Code 67530
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
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SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="25000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 40 / 54

<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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. TEAM SUNUNU		Transaction ID: SB23.6024 Date of Disbursement																					
Mailing Address PO BOX 500		<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>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	3		0	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	6		2	0	0	7														
City RYE	State NH	Zip Code 03870	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution			<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: NH District: 00		Category/Type 011																					

Full Name (Last, First, Middle Initial) B. TEAM SUNUNU		Transaction ID: SB23.6026 Date of Disbursement																					
Mailing Address PO BOX 500		<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>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	3		0	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	6		2	0	0	7														
City RYE	State NH	Zip Code 03870	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution			<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: NH District: 00		Category/Type 011																					

SUBTOTAL of Disbursements This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	91000.00

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)

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Belknap County Republican Committee		Transaction ID: SB29.5998 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1496 Old N Main St		Amount of Each Disbursement this Period 200.00
City Laconia State NH Zip Code 03246	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

Full Name (Last, First, Middle Initial) B. Boutin for State Representative		Transaction ID: SB29.5996 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 7
Mailing Address 1465 Hooksett Road #80		Amount of Each Disbursement this Period 250.00
City Hooksett State NH Zip Code 03106	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

Full Name (Last, First, Middle Initial) C. Carroll County Republican Committee		Transaction ID: SB29.6008 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 7
Mailing Address P.O. Box 237		Amount of Each Disbursement this Period 390.00
City Jackson State NH Zip Code 03846	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	840.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
White Mountain PAC

A. Cheshire County Republican Committee Full Name (Last, First, Middle Initial) Mailing Address Attn: Chip Fairbanks P.O. Box 1331 City Keene State NH Zip Code 03431 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB29.5999 Date of Disbursement: <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>4</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period: <table border="1"> <tr> <td>200.00</td> </tr> </table> Category/Type: 011	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	3	0	/	2	0	0	7	200.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4	/	3	0	/	2	0	0	7														
200.00																							

B. Coos County Republican Committee Full Name (Last, First, Middle Initial) Mailing Address 806 Route 3 City North Stratford State NH Zip Code 03540 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB29.6010 Date of Disbursement: <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>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period: <table border="1"> <tr> <td>250.00</td> </tr> </table> Category/Type: 011	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	4	/	2	0	0	7	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	1	4	/	2	0	0	7														
250.00																							

C. Laena Fallon Full Name (Last, First, Middle Initial) Mailing Address 501 Barn Door Gap City Strafford State NH Zip Code 03884 Purpose of Disbursement Consulting Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB29.5978 Date of Disbursement: <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>5</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period: <table border="1"> <tr> <td>1540.00</td> </tr> </table> Category/Type: 001	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	4	/	2	0	0	7	1540.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	1	4	/	2	0	0	7														
1540.00																							

SUBTOTAL of Disbursements This Page (optional)	1990.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Flegal Law Office, PA		Transaction ID: SB29.5988 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 159 Main Street		Amount of Each Disbursement this Period 148.41
City Nashua State NH Zip Code 03060	Purpose of Disbursement Administrative Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) B. L Cheryl Freed		Transaction ID: SB29.5989 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 159 Main Street		Amount of Each Disbursement this Period 900.00
City Nashua State NH Zip Code 03060	Purpose of Disbursement Administrative Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) C. Tim Lyons		Transaction ID: SB29.5964 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 12 Main St		Amount of Each Disbursement this Period 114.50
City Salem State NH Zip Code 03079	Purpose of Disbursement Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	1162.91
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 44 / 54

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Tim Lyons		Transaction ID: SB29.5965 Date of Disbursement 02 / 23 / 2007
Mailing Address 12 Main St		Amount of Each Disbursement this Period 1423.08
City Salem State NH Zip Code 03079	001 Category/ Type	
Purpose of Disbursement Consulting Fee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tim Lyons		Transaction ID: SB29.5969 Date of Disbursement 03 / 09 / 2007
Mailing Address 12 Main St		Amount of Each Disbursement this Period 1423.08
City Salem State NH Zip Code 03079	001 Category/ Type	
Purpose of Disbursement Consulting Fee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tim Lyons		Transaction ID: SB29.5971 Date of Disbursement 03 / 23 / 2007
Mailing Address 12 Main St		Amount of Each Disbursement this Period 1423.08
City Salem State NH Zip Code 03079	001 Category/ Type	
Purpose of Disbursement Consulting Fee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4269.24
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 45 / 54

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Tim Lyons		Transaction ID: SB29.5973 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 12 Main St		Amount of Each Disbursement this Period 1423.08
City Salem State NH Zip Code 03079	001 Category/ Type	
Purpose of Disbursement Consulting Fee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tim Lyons		Transaction ID: SB29.5974 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 12 Main St		Amount of Each Disbursement this Period 1423.08
City Salem State NH Zip Code 03079	001 Category/ Type	
Purpose of Disbursement Consulting Fee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tim Lyons		Transaction ID: SB29.5975 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 12 Main St		Amount of Each Disbursement this Period 644.12
City Salem State NH Zip Code 03079	001 Category/ Type	
Purpose of Disbursement Administrative Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3490.28
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 46 / 54

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Tim Lyons		Transaction ID: SB29.5977 Date of Disbursement 05 / 11 / 2007	
Mailing Address 12 Main St		Amount of Each Disbursement this Period 1423.08	
City Salem State NH Zip Code 03079	Purpose of Disbursement Consulting Fee Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Tim Lyons		Transaction ID: SB29.5979 Date of Disbursement 05 / 18 / 2007	
Mailing Address 12 Main St		Amount of Each Disbursement this Period 1423.08	
City Salem State NH Zip Code 03079	Purpose of Disbursement Consulting Fee Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tim Lyons		Transaction ID: SB29.5982 Date of Disbursement 05 / 30 / 2007	
Mailing Address 12 Main St		Amount of Each Disbursement this Period 1423.08	
City Salem State NH Zip Code 03079	Purpose of Disbursement Consulting Fee Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4269.24
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Tim Lyons		Transaction ID: SB29.5986 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 12 Main St		Amount of Each Disbursement this Period 1423.08
City Salem State NH Zip Code 03079	Purpose of Disbursement Consulting Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Merrimack County Republican Committee		Transaction ID: SB29.6005 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1 Capitol St		Amount of Each Disbursement this Period 200.00
City Concord State NH Zip Code 03302	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. New Hampshire Republican State Committee		Transaction ID: SB29.5994 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 134 North Main Street		Amount of Each Disbursement this Period 2000.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Political Event Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3623.08
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 48 / 54

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Pearson & Associates		Transaction ID: SB29.5961 Date of Disbursement
Mailing Address 900 19th Street, NW 8th Floor		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Fundraising Expenses	<input type="text" value="003"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="8690.00"/>

Full Name (Last, First, Middle Initial) B. Pearson & Associates		Transaction ID: SB29.5962 Date of Disbursement
Mailing Address 900 19th Street, NW 8th Floor		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Consulting Fee	<input type="text" value="001"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) C. Pearson & Associates		Transaction ID: SB29.5963 Date of Disbursement
Mailing Address 900 19th Street, NW 8th Floor		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Administrative Expense	<input type="text" value="001"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="800.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="14490.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Pearson & Associates		Transaction ID: SB29.5966 Date of Disbursement
Mailing Address 900 19th Street, NW 8th Floor		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Administrative Expense	<input type="text" value="001"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="31.76"/>

Full Name (Last, First, Middle Initial) B. Pearson & Associates		Transaction ID: SB29.5967 Date of Disbursement
Mailing Address 900 19th Street, NW 8th Floor		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Consulting Fee	<input type="text" value="001"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) C. Pearson & Associates		Transaction ID: SB29.5970 Date of Disbursement
Mailing Address 900 19th Street, NW 8th Floor		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Fundraising Expense	<input type="text" value="003"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="6564.36"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="11596.12"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Pearson & Associates		Transaction ID: SB29.5972 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20006	Purpose of Disbursement Consulting Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) B. Pearson & Associates		Transaction ID: SB29.5976 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20006	Purpose of Disbursement Consulting Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) C. Pearson & Associates		Transaction ID: SB29.5980 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 4400.00
City Washington State DC Zip Code 20006	Purpose of Disbursement Fundraising Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 003

SUBTOTAL of Disbursements This Page (optional) ▶	14400.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Pearson & Associates		Transaction ID: SB29.5983 Date of Disbursement
Mailing Address 900 19th Street, NW 8th Floor		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Consulting Fee	<input type="text" value="001"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) B. Pearson & Associates		Transaction ID: SB29.5984 Date of Disbursement
Mailing Address 900 19th Street, NW 8th Floor		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Administrative Expense	<input type="text" value="001"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="980.00"/>

Full Name (Last, First, Middle Initial) C. Pearson & Associates		Transaction ID: SB29.5985 Date of Disbursement
Mailing Address 900 19th Street, NW 8th Floor		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Fundraising Expense	<input type="text" value="003"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="500.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6480.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Pearson & Associates		Transaction ID: SB29.5987 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20006	001 Category/ Type	
Purpose of Disbursement Consulting Fee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Rachel Pearson		Transaction ID: SB29.5968 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7
Mailing Address Pearson & Associates 900 19th Street, NW		Amount of Each Disbursement this Period 140.00
City Washington State DC Zip Code 20006	001 Category/ Type	
Purpose of Disbursement Administrative Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Postmaster		Transaction ID: SB29.5981 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 12 Loudon Rd		Amount of Each Disbursement this Period 56.00
City Concord State NH Zip Code 03302	001 Category/ Type	
Purpose of Disbursement Post Office Box Rental Fee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5196.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 53 / 54

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Rockingham County Republican Committee		Transaction ID: SB29.6000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address c/o Mrs. Jeannie Sangeanio 39 Hampton Meadows		Amount of Each Disbursement this Period 100.00
City Hampton State NH Zip Code 03842		
Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Senate Republican Victory PAC		Transaction ID: SB29.5995 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 582 Chestnut St		Amount of Each Disbursement this Period 2500.00
City Manchester State NH Zip Code 03104		
Purpose of Disbursement Political Event Candidate Name	011 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Strafford County Republican Committee		Transaction ID: SB29.6007 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 7
Mailing Address HC 74 Box 42		Amount of Each Disbursement this Period 200.00
City Strafford State NH Zip Code 03815		
Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2800.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Sullivan County Republican Committee		Transaction ID: SB29.6003	
Mailing Address 66 Stage Coach Road		Date of Disbursement 04 / 05 / 2007	
City Sunapee	State NH	Zip Code 03782	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement Contribution		011 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. The Mount Sunapee Community Scholarship Fund		Transaction ID: SB29.6012	
Mailing Address 1398 Route 103		Date of Disbursement 01 / 29 / 2007	
City Sunapee	State NH	Zip Code 03782	Amount of Each Disbursement this Period 600.00
Purpose of Disbursement Donation		012 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	800.00
TOTAL This Period (last page this line number only)	75406.87