

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
ORRINPAC

Report Covering the Period: From:

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

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

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

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

| | | | |
|---|---|---|---|
| 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 | | 70096.10 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 7 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 154903.35 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 97316.91 | 452034.24 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 252220.26 | 522130.34 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 51916.20 | 321826.28 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 200304.06 | 200304.06 | | | | | | | | |
| 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) | 2611.29 | | | | | | | | | |

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
ORRINPAC

Report Covering the Period: From:

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

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

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

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

| | | | |
|---|---|---|---|
| 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 | 36050.00 | 230750.00 |
| (i) Itemized (use Schedule A) | 0.00 | 200.00 |
| (ii) Unitemized | 36050.00 | 230950.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (b) Political Party Committees | 60637.00 | 219384.00 |
| (c) Other Political Committees (such as PACs) | 96687.00 | 450334.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | | |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 629.91 | 1700.24 |
| 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)) | 97316.91 | 452034.24 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 97316.91 | 452034.24 |

DETAILED SUMMARY PAGE

of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 21916.20 | 100826.28 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 21916.20 | 100826.28 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 30000.00 | 209000.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 12000.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 51916.20 | 321826.28 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 51916.20 | 321826.28 |

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 | 96687.00 | 450334.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 96687.00 | 450334.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 21916.20 | 100826.28 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 21916.20 | 100826.28 |

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

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

FOR LINE NUMBER: PAGE 6 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
ORRINPAC

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

Mailing Address 701 PENNSYLVANIA AVE, NW, STE 800

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00340356

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

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

Transaction ID: 80111.C1888

Amount of Each Receipt this Period
3000.00

Receipt

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

Mailing Address PALLADIAN CORPORATE CENTER
220 LEIGH FARM RD

City State Zip Code
DURHAM NC 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

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 Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 71210.C1848

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
AM. INTELLECTUAL PROPERTY LAW ASSOC. PAC

Mailing Address 241 18TH ST. SOUTH, STE 700

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C** C00156935

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 71203.C1841

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **9000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 32

(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)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
APMA PODIATRY PAC

Mailing Address 9312 OLD GEORGETOWN RD

City State Zip Code
BETHESDA MD 20814-1621

FEC ID number of contributing federal political committee. **C** C00008839

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
1 2 / 0 7 / 2 0 0 7

Transaction ID: 71210.C1849

Amount of Each Receipt this Period

2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
ASTRAZENECA PAC (AZPAC)

Mailing Address 1800 CONCORD PIKE
P.O. BOX 15438

City State Zip Code
WILMINGTON DE 19850

FEC ID number of contributing federal political committee. **C** C00279455

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 80111.C1885

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
AT & T INC. FED PAC

Mailing Address 175 E. HOUSTON, RM. 7-A-50

City State Zip Code
SAN ANTONIO TX 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 80111.C1878

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ORRINPAC

A. Full Name (Last, First, Middle Initial)
BARBOUR GRIFFITH & ROGERS PAC
Mailing Address 1275 PENNSYLVANIA AVE, NW, 10 FLR
City WASHINGTON State DC Zip Code 20004
FEC ID number of contributing federal political committee. **C** C00355230
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2384.00
Date of Receipt 12 / 14 / 2007
Transaction ID: 80111.C1879
Amount of Each Receipt this Period 137.00
In-Kind
Ground Transportation 11-14/07

B. Full Name (Last, First, Middle Initial)
BIOTECHNOLOGY INDUSTRY ORGANIZATION
Mailing Address 1225 I ST, NW, STE 400
City WASHINGTON State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00355677
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 12 / 17 / 2007
Transaction ID: 80111.C1871
Amount of Each Receipt this Period 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
BROWNSTEIN HYATT FABER SCHRECK PAC
Mailing Address 410 17TH ST, 22ND FLR
City DENVER State CO Zip Code 80202
FEC ID number of contributing federal political committee. **C** C00390583
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00
Date of Receipt 12 / 07 / 2007
Transaction ID: 71210.C1850
Amount of Each Receipt this Period 2000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 3137.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 32

(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)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
COMCAST CORPORATION PAC

Mailing Address 1500 MARKET ST
33RD FLR EAST TOWER

City State Zip Code
PHILADELPHIA PA 19102

FEC ID number of contributing federal political committee. **C** C00248716

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
1 2 / 3 1 / 2 0 0 7

Transaction ID: 80111.C1886

Amount of Each Receipt this Period

1500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
ERNST & YOUNG PAC

Mailing Address 1225 CONNECTICUT AVE, N.W.

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00227744

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 Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 80111.C1891

Amount of Each Receipt this Period

5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
FMR CORP PAC

Mailing Address 82 DEVONSHIRE ST

City State Zip Code
BOSTON MA 02109

FEC ID number of contributing federal political committee. **C** C00380550

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 Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 80111.C1893

Amount of Each Receipt this Period

4000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶

10500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 32

(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)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY PAC

Mailing Address 1299 PENNSYLVANIA AVE

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
12 / 17 / 2007

Transaction ID: 80111.C1861

Amount of Each Receipt this Period
1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
GOOGLE NETPAC

Mailing Address 1001 PENNSYLVANIA AVE, NW, STE 600

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
12 / 27 / 2007

Transaction ID: 80111.C1892

Amount of Each Receipt this Period
2000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
HEALTHCARE DISTRIBUTION MANAGEMENT ASSN

Mailing Address 901 N. GLEBE RD, STE 1000

City State Zip Code
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C** C00247569

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
12 / 17 / 2007

Transaction ID: 80111.C1869

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32
(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)
ORRINPAC

A. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS

Mailing Address 412 FIRST ST, SE, STE 300

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 17 / 2007
Transaction ID: 80111.C1872
Amount of Each Receipt this Period: 1000.00
Receipt

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

Mailing Address P.O. BOX 18254

City WASHINGTON State DC Zip Code 20036-9998

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: 80111.C1890
Amount of Each Receipt this Period: 5000.00
Receipt

C. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INS. CO-PAC

Mailing Address 1295 STATE ST

City SPRINGFIELD State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 17 / 2007
Transaction ID: 80111.C1873
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 32
(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)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
NEW YORK LIFE PAC - NYLPAC

Mailing Address 51 MADISON AVE

City State Zip Code
NEW YORK NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

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
12 / 31 / 2007

Transaction ID: 80111.C1894

Amount of Each Receipt this Period
5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
OPPENHEIMER FUNDS PAC

Mailing Address TWO WORLD FINANCIAL CENTER

City State Zip Code
NEW YORK NY 10080

FEC ID number of contributing federal political committee. **C** C00367920

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2007

Transaction ID: 80111.C1883

Amount of Each Receipt this Period
1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
THE ACXIOM CORP. ASSOCIATES PAC

Mailing Address #1 INFORMATION WY

City State Zip Code
LITTLE ROCK AR 72202

FEC ID number of contributing federal political committee. **C** C00350835

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 17 / 2007

Transaction ID: 80111.C1875

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **7000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 32

(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)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
THE GLAXOSMITHKLINE PAC

Mailing Address FIVE MOORE DRIVE
P. O. BOX 13398

City State Zip Code
DURHAM NC 27709

FEC ID number of contributing federal political committee. **C** C00199703

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 Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 80111.C1889

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
UNIVERSAL MUSIC GROUP PAC

Mailing Address P.O. BOX 560519

City State Zip Code
CHARLOTTE NC 28256

FEC ID number of contributing federal political committee. **C** C00392464

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 80111.C1887

Amount of Each Receipt this Period

1500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 55 GLENLAKE PKWY, NE

City State Zip Code
ATLANTA GA 30328

FEC ID number of contributing federal political committee. **C** C00064766

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 Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 80111.C1865

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ORRINPAC

A. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC.

Mailing Address GOOD GOVERNMENT CLUB
771 PARKWAY AVE

City State Zip Code
TRENTON NJ 08618

FEC ID number of contributing federal political committee. **C** C00186288

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
1 2 / 1 2 / 2 0 0 7

Transaction ID: 80111.C1859

Amount of Each Receipt this Period
2500.00

Receipt

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

Mailing Address 120 MONUMENT CIR

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 ▼ 3000.00

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

Transaction ID: 80111.C1884

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 3500.00

TOTAL This Period (last page this line number only) ► 60637.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 32

(check only one)

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

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NAME OF COMMITTEE (In Full)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
BARBOUR GRIFFITH & ROGERS, LLC

Mailing Address P. O. BOX 14416

City State Zip Code
WASHINGTON DC 20044

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

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: 71203.C1844

Amount of Each Receipt this Period

1500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
LANNY GRIFFITH

Mailing Address P. O. BOX 14416

City State Zip Code
WASHINGTON DC 20044

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

Name of Employer Occupation
BARBOUR GRIFFITH & ROGERS, LLC CEO

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: 71203.C1845

Amount of Each Receipt this Period

500.00

Memo

[MEMO ITEM]
Partnership->BARBOUR GRIF-FITH & ROGERS, LLC

C.

Full Name (Last, First, Middle Initial)
BRANT IMPERATORE

Mailing Address P. O. BOX 14416

City State Zip Code
WASHINGTON DC 20044

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

Name of Employer Occupation
BARBOUR GRIFFITH & ROGERS, LLC PRINCIPAL

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: 71203.C1846

Amount of Each Receipt this Period

500.00

Memo

[MEMO ITEM]
Partnership->BARBOUR GRIF-FITH & ROGERS, LLC

SUBTOTAL of Receipts This Page (optional) ▶

1500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
JENNIFER LARKIN LUKAWSKI

Mailing Address P. O. BOX 14416

City State Zip Code
WASHINGTON DC 20044

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

Name of Employer Occupation
BARBOUR GRIFFITH & ROGERS, LLC PRINCIPAL

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

Date of Receipt
MM / DD / YYYY
12 / 03 / 2007

Transaction ID: 71203.C1847

Amount of Each Receipt this Period
500.00

Memo
[MEMO ITEM]
Partnership->BARBOUR GRIF-FITH & ROGERS, LLC

B.

Full Name (Last, First, Middle Initial)
VICTOR CABRAL

Mailing Address 7648 BURFORD DR

City State Zip Code
MC LEAN VA 22102

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

Name of Employer Occupation
NBC ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 836.91

Date of Receipt
MM / DD / YYYY
12 / 17 / 2007

Transaction ID: 80111.C1877

Amount of Each Receipt this Period
836.91

In-Kind
Note: Food & Drink

C.

Full Name (Last, First, Middle Initial)
VICTOR CABRAL

Mailing Address 7648 BURFORD DR

City State Zip Code
MC LEAN VA 22102

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

Name of Employer Occupation
NBC ATTORNEY

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

Date of Receipt
MM / DD / YYYY
12 / 17 / 2007

Transaction ID: 80111.C1876

Amount of Each Receipt this Period
163.09

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ORRINPAC

A. Full Name (Last, First, Middle Initial)
JEANNE CAMPBELL

Mailing Address THE ST. NICHOLAS

City State Zip Code
WASHINGTON DC 20008

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
12 / 17 / 2007

Transaction ID: 80111.C1870

Amount of Each Receipt this Period
1500.00

Receipt

B. Full Name (Last, First, Middle Initial)
MANUS M. COONEY

Mailing Address 8801 BEL AIR PL.

City State Zip Code
POTOMAC MD 20854

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

Name of Employer POTOMAC COUNSEL, LLC. Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
12 / 03 / 2007

Transaction ID: 71203.C1840

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
RICHARD COTTON

Mailing Address 1185 APRK AVE, APT. 8A

City State Zip Code
NEW YORK NY 10128

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

Name of Employer NBC Universal Occupation LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
12 / 17 / 2007

Transaction ID: 80111.C1862

Amount of Each Receipt this Period
1000.00

Receipt

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 32

(check only one)

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

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NAME OF COMMITTEE (In Full)
ORRINPAC

A. Full Name (Last, First, Middle Initial)
DAVID W. CROSS

Mailing Address 1073 GRANVILLE DR

City State Zip Code
NEWPORT BEACH CA 92660-6250

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

Name of Employer
SELECT MEDICAL GROUP Occupation
C. D. O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

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

Transaction ID: 71210.C1851

Amount of Each Receipt this Period
2000.00

Receipt

B. Full Name (Last, First, Middle Initial)
ALEXANDER DAHL

Mailing Address 3101 N. THOMAS ST

City State Zip Code
ARLINGTON VA 22207

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

Name of Employer
BROWNSTEIN HYATT FARBER SCHREC Occupation
ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: 80111.C1881

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
BRENT A. DELMONTE

Mailing Address 1204 N. UTAH ST

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer
Information Requested Occupation
Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

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

Transaction ID: 80111.C1867

Amount of Each Receipt this Period
500.00

Receipt

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
ORRINPAC

A.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) JACK GERARD | | Date of Receipt MM / DD / YYYY 12 / 31 / 2007 |
| Mailing Address 188 RIVER PARK DR | | Transaction ID: 80111.C1880 |
| City GREAT FALLS | State VA | Zip Code 22066 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer AMERICAN CHEMISTRY COUNCIL | Occupation CEO | Receipt |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

B.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) DENNIS K. HAYS | | Date of Receipt MM / DD / YYYY 12 / 17 / 2007 |
| Mailing Address 1398 PLD QUINCY LN | | Transaction ID: 80111.C1874 |
| City RESTON | State VA | Zip Code 20194-1308 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 750.00 |
| Name of Employer THORIUM POWER, LTD | Occupation BUSINESSMAN | Receipt |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 750.00 | |

C.

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) ARTHUR KASSEL | | Date of Receipt MM / DD / YYYY 12 / 17 / 2007 |
| Mailing Address 4700 RAMONA BLVD | | Transaction ID: 80111.C1864 |
| City MONTEREY PARK | State CA | Zip Code 91754-2169 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer LA COUNTY SHERIFFS OFFICE | Occupation SENIOR SPECIAL ADVISOR | Receipt |
| 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) | ▶ | 2750.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 32

(check only one)

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

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NAME OF COMMITTEE (In Full)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
BEN J. LIPPS

Mailing Address 95 HAYDEN AVE

City State Zip Code
LEXINGTON MA 02421-3378

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: 71203.C1842

Amount of Each Receipt this Period

2300.00

Receipt

B.

Full Name (Last, First, Middle Initial)
IBRA B. MORALES

Mailing Address 2000 BROADWAY, APT. 1A

City State Zip Code
NEW YORK NY 10023

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

Name of Employer Information Requested Occupation Information Requested
TELEMUNDO NETWORK PRESIDENT

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

Date of Receipt

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

Transaction ID: 80111.C1863

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
JOHN B. MULETA

Mailing Address 2120 N. TROY ST.

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer Information Requested Occupation Information Requested

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

Date of Receipt

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

Transaction ID: 80111.C1860

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
ROBERT A. ORTENZIO

Mailing Address 4716 OLD GETTYSBURG

City State Zip Code
MECHANICSBURG PA 17055

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

Name of Employer
SELECT MEDICAL GROUP

Occupation
C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2007

Transaction ID: 71210.C1855

Amount of Each Receipt this Period
1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
ROBERT A. ORTENZIO

Mailing Address 4716 OLD GETTYSBURG

City State Zip Code
MECHANICSBURG PA 17055

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

Name of Employer
SELECT MEDICAL GROUP

Occupation
C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2007

Transaction ID: 71210.C1856

Amount of Each Receipt this Period
1500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
ROCCO A. ORTENZIO

Mailing Address 7 WESTWIND DRIVE

City State Zip Code
LEMOYNE PA 17043

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

Name of Employer
SELECT MEDICAL GROUP

Occupation
EXECUTIVE CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2007

Transaction ID: 71210.C1853

Amount of Each Receipt this Period
1500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ORRINPAC

A. Full Name (Last, First, Middle Initial)
ROCCO A. ORTENZIO

Mailing Address 7 WESTWIND DRIVE

City LEMOYNE State PA Zip Code 17043

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

Name of Employer SELECT MEDICAL GROUP Occupation EXECUTIVE CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 07 / 2007

Transaction ID: 71210.C1854

Amount of Each Receipt this Period 1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
MICHAEL C. PALMER

Mailing Address 11601 WILSHIRE BLVD, #2300

City LOS ANGELES State CA Zip Code 90025

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

Name of Employer MACERICH Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 03 / 2007

Transaction ID: 71203.C1839

Amount of Each Receipt this Period 5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
ROBERT J. POWELL JR.

Mailing Address 32 BANCROFT RD

City LAWRENCE State MA Zip Code 01840-4120

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

Name of Employer Fresenius Medical Care Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 03 / 2007

Transaction ID: 71203.C1843

Amount of Each Receipt this Period 5000.00

Receipt

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) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 / 32 |
| | <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)
ORRINPAC

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) PATRICIA A. RICE | Date of Receipt MM / DD / YYYY 12 / 07 / 2007 |
| | Mailing Address 1371 ENGLISH DR | Transaction ID: 71210.C1852 |
| | City State Zip Code MECHANICSBURG PA 17055 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) LINDA E. TARPLIN | Date of Receipt MM / DD / YYYY 12 / 31 / 2007 |
| | Mailing Address 1212 NEW YORK AVE NW | Transaction ID: 80111.C1882 |
| | City State Zip Code WASHINGTON DC 20005 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) DAVID VILLANUEVA | Date of Receipt MM / DD / YYYY 12 / 17 / 2007 |
| | Mailing Address 55 SOUTH LAKE AVE, STE 850 | Transaction ID: 80111.C1866 |
| | City State Zip Code PASADENA CA 91101 | Amount of Each Receipt this Period 2000.00 |
| | FEC ID number of contributing federal political committee. C | Receipt |
| | Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 4000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 32
 (check only one)

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

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NAME OF COMMITTEE (In Full)
ORRINPAC

A. Full Name (Last, First, Middle Initial)
A. SCOTT WHITAKER

Mailing Address 710 TIMBER LN

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| FALLS CHURCH | VA | 22046 |

FEC ID number of contributing federal political committee. C

| | |
|---|---|
| Name of Employer Information Requested | Occupation Information Requested |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 |

Date of Receipt

| |
|--|
| M M / D D / Y Y Y Y |
| 12 / 17 / 2007 |

Transaction ID: 80111.C1868

Amount of Each Receipt this Period

| |
|---------|
| 1000.00 |
|---------|

Receipt

| | |
|--|--|
| SUBTOTAL of Receipts This Page (optional) | 1000.00 |
| TOTAL This Period (last page this line number only) | 36050.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 25 / 32 | |
| | (check only one) | | | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17 |

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| |
|---|
| NAME OF COMMITTEE (In Full) ORRINPAC |
|---|

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) ZIONS BANK | Date of Receipt |
| | Mailing Address 310 SOUTH MAIN STREET | <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/> |
| | City State Zip Code SALT LAKE CITY UT 84101- | Transaction ID: 80111.C1895 |
| | FEC ID number of contributing federal political committee. <input type="text" value="C"/> | Amount of Each Receipt this Period <input type="text" value="629.91"/> |
| | Name of Employer Occupation | Interest Received |
| | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="1700.24"/> |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="629.91"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="629.91"/> |

**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 26 / 32

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
ORRINPAC

A. Full Name (Last, First, Middle Initial)
BARBOUR GRIFFITH & ROGERS PAC

Mailing Address 1275 PENNSYLVANIA AVE, NW, 10 FLR

City WASHINGTON State DC Zip Code 20004-

Purpose of Disbursement Ground Transportation 11/14/07

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80111.C1879IK
Date of Disbursement: 12 / 14 / 2007

Amount of Each Disbursement this Period: 137.00

IN KIND: GROUND TRANSPORTATION 11/14/07

B. Full Name (Last, First, Middle Initial)
VICTOR CABRAL

Mailing Address 7648 BURFORD DR

City MC LEAN State VA Zip Code 22102-

Purpose of Disbursement Note: Food & Drink

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80111.C1877IK
Date of Disbursement: 12 / 17 / 2007

Amount of Each Disbursement this Period: 836.91

IN KIND: NOTE: FOOD & DRINK

C. Full Name (Last, First, Middle Initial)
CBIZ FPG, LLC

Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650

City SALT LAKE CITY State UT Zip Code 84101-

Purpose of Disbursement Accounting fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80111.E1710
Date of Disbursement: 12 / 13 / 2007

Amount of Each Disbursement this Period: 2088.38

ACCOUNTING FEES

SUBTOTAL of Disbursements This Page (optional) ► 3062.29

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 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)
ORRINPAC

A. Full Name (Last, First, Middle Initial)
JACE JOHNSON

Mailing Address 9631 GOERGETOWN PIKE

City GREAT FALLS State VA Zip Code 22066-

Purpose of Disbursement Reimbursement see below

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80111.E1713
Date of Disbursement 12 / 13 / 2007

Amount of Each Disbursement this Period 340.74

REIMBURSEMENT SEE BELOW

B. Full Name (Last, First, Middle Initial)
Hertz Rent A Car

Mailing Address 1606 S Main

City SANTA ANA State CA Zip Code 92707-

Purpose of Disbursement Car rental

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80111.E1714
Date of Disbursement 11 / 11 / 2007

Amount of Each Disbursement this Period 322.74

[MEMO ITEM]
MEMO: CAR RENTAL

C. Full Name (Last, First, Middle Initial)
NATIONAL POLITICAL ASSOCIATES

Mailing Address P.O. BOX 2204

City WASHINGTON State DC Zip Code 20013-

Purpose of Disbursement Pac consulting postage & supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80111.E1719
Date of Disbursement 12 / 06 / 2007

Amount of Each Disbursement this Period 8453.90

PAC CONSULTING POSTAGE & SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ► 8794.64

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 28 / 32

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
ORRINPAC

| | | | | | | | | | | | | | | | | | | | | | |
|---------|--|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| A. | Full Name (Last, First, Middle Initial) NATIONAL POLITICAL ASSOCIATES | Transaction ID: 80111.E1720 Date of Disbursement | | | | | | | | | | | | | | | | | | | |
| | Mailing Address P.O. BOX 2204 | <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>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 | 1 | 2 | | 1 | 4 | | 2 | 0 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 2 | | 1 | 4 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| | City WASHINGTON State DC Zip Code 20013- | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | |
| | Purpose of Disbursement Pac consulting | <table border="1"><tr><td>8000.00</td></tr></table> | 8000.00 | | | | | | | | | | | | | | | | | | |
| 8000.00 | | | | | | | | | | | | | | | | | | | | | |
| | 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) ▼ | | | | | | | | | | | | | | | | | | | |
| | | PAC CONSULTING | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | |
|--------|--|--|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| B. | Full Name (Last, First, Middle Initial) North Capitol Street Enterprises | Transaction ID: 80111.E1721 Date of Disbursement | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 400 North Capitol Street, NW Suite 585 | <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>1</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 | 1 | 2 | | 1 | 3 | | 2 | 0 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 2 | | 1 | 3 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| | City WASHINGTON State DC Zip Code 20001- | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | |
| | Purpose of Disbursement Office rent | <table border="1"><tr><td>806.81</td></tr></table> | 806.81 | | | | | | | | | | | | | | | | | | |
| 806.81 | | | | | | | | | | | | | | | | | | | | | |
| | 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) ▼ | | | | | | | | | | | | | | | | | | | |
| | | OFFICE RENT | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | |
|---------|--|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| C. | Full Name (Last, First, Middle Initial) THE MONOCLE | Transaction ID: 80111.E1722 Date of Disbursement | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 107 D STREET, N.W. | <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>1</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 | 1 | 2 | | 1 | 3 | | 2 | 0 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 2 | | 1 | 3 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| | City WASHINGTON State DC Zip Code 20002- | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | |
| | Purpose of Disbursement Pac luncheon | <table border="1"><tr><td>1131.12</td></tr></table> | 1131.12 | | | | | | | | | | | | | | | | | | |
| 1131.12 | | | | | | | | | | | | | | | | | | | | | |
| | 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) ▼ | | | | | | | | | | | | | | | | | | | |
| | | PAC LUNCHEON | | | | | | | | | | | | | | | | | | | |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | <table border="1"><tr><td>9937.93</td></tr></table> | 9937.93 |
| 9937.93 | | |
| 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)

PAGE 29 / 32

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
ORRINPAC

| | | | | |
|--|---|---|--|---|
| A. | Full Name (Last, First, Middle Initial) ZIONS BANK | | Transaction ID: 80111.E1723 | |
| | Mailing Address 310 SOUTH MAIN STREET | | Date of Disbursement 12 / 21 / 2007 | |
| | City SALT LAKE CITY | State UT | Zip Code 84101- | Amount of Each Disbursement this Period 121.34 |
| | Purpose of Disbursement Service fees | | Category/ Type | SERVICE FEES |
| 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 | | |
| State: District: | | <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional) ►

121.34

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

21916.20

**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)
ORRINPAC

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) ROB BISHOP FOR CONGRESS Mailing Address 74 N. 300 E. City BRIGHAM CITY State UT Zip Code 84302- Purpose of Disbursement CONTRIBUTION TO GENERAL Candidate Name ROBERT BISHOP Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80111.E1708 Date of Disbursement 12 / 18 / 2007 |
| | Amount of Each Disbursement this Period 5000.00 Category/Type CONTRIBUTION TO GENERAL |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) CHRIS CANNON FOR CONGRESS Mailing Address 257 EAST 200 SOUTH, SUITE 950 City SALT LAKE CITY State UT Zip Code 84111- Purpose of Disbursement CONTRIBUTION TO PRIMARY Candidate Name CHRISTOPHER B CANNON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 03 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80111.E1712 Date of Disbursement 12 / 18 / 2007 |
| | Amount of Each Disbursement this Period 5000.00 Category/Type CONTRIBUTION TO PRIMARY |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) JIM GILMORE FOR SENATE Mailing Address P.O. BOX 320037 City ALEXANDRIA State VA Zip Code 22320- Purpose of Disbursement CONTRIBUTION TO PRIMARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80116.E1725 Date of Disbursement 12 / 20 / 2007 |
| | Amount of Each Disbursement this Period 5000.00 Category/Type CONTRIBUTION TO PRIMARY |

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
ORRINPAC

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) MICHAEL JOHANNNS FOR SENATE | Transaction ID: 80111.E1718 Date of Disbursement |
| | Mailing Address ATTN: DEAN DENNHARDT P. O. BOX 80297 | <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/> |
| | City LINCORN State NE Zip Code 68501- | Amount of Each Disbursement this Period |
| | Purpose of Disbursement CONTRIBUTION TO PRIMARY | <input type="text" value="5000.00"/> |
| | Candidate Name MICHAEL O JOHANNNS | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | CONTRIBUTION TO PRIMARY |

| | | |
|----|---|---|
| B. | Full Name (Last, First, Middle Initial) JIM RISCH FOR SENATE | Transaction ID: 80111.E1717 Date of Disbursement |
| | Mailing Address 407 W JEFFERSON STREET | <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/> |
| | City BOISE State ID Zip Code 83702- | Amount of Each Disbursement this Period |
| | Purpose of Disbursement CONTRIBUTION TO PRIMARY | <input type="text" value="5000.00"/> |
| | Candidate Name JAMES E RISCH | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 00 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | CONTRIBUTION TO PRIMARY |

| | | |
|----|---|---|
| C. | Full Name (Last, First, Middle Initial) BOB SCHAFFER FOR SENATE | Transaction ID: 80111.E1709 Date of Disbursement |
| | Mailing Address 5027 ALDER COURT | <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/> |
| | City FORT COLLINS State CO Zip Code 80525- | Amount of Each Disbursement this Period |
| | Purpose of Disbursement CONTRIBUTION TO PRIMARY | <input type="text" value="5000.00"/> |
| | Candidate Name ROBERT W SCHAFFER | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | CONTRIBUTION TO PRIMARY |

| | |
|--|---------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="15000.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="30000.00"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
ORRINPAC

| | | | |
|--|-------------|--------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CBIZ FPG, LLC | | | Nature of Debt (Purpose): Accounting fees |
| Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650 | | | |
| City SALT LAKE CITY | State UT | ZIP Code 84101- | |

| | | | |
|---|-----------------------------|--|--|
| Outstanding Balance Beginning This Period 0.00 | | Transaction ID: LS80111.E1711 | |
| Amount Incurred This Period 2230.45 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2230.45 | |

| | | | |
|---|-------------|--------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ZIONS BANK | | | Nature of Debt (Purpose): Credit card charges |
| Mailing Address 310 SOUTH MAIN STREET | | | |
| City SALT LAKE CITY | State UT | ZIP Code 84101- | |

| | | | |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period 0.00 | | Transaction ID: LS80111.E1724 | |
| Amount Incurred This Period 380.84 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 380.84 | |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 2611.29 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | 2611.29 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | 2611.29 |