



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Senate Majority Fund

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		172759.93
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	365404.41									
(c) Total Receipts (from Line 19) .....	288370.30	646584.47								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	653774.71	819344.40								
7. Total Disbursements (from Line 31) .....	203094.02	368663.71								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	450680.69	450680.69								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Senate Majority Fund

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	52750.00	125750.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	52750.00	125750.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	235000.00	519700.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	287750.00	645450.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	620.30	1134.47
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)) .....	288370.30	646584.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	288370.30	646584.47

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	90594.02	181163.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	90594.02	181163.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	110000.00	185000.00
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.....	2500.00	2500.00
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))..	203094.02	368663.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	203094.02	368663.71

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	287750.00	645450.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	287750.00	645450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	90594.02	181163.71
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	90594.02	181163.71

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 95

(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

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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
Hunter Bates

Mailing Address 101 Constitution Avenue, NW #900 W

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation  
C2 Group Partner

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

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2009

Transaction ID: SA11AI.9222

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)  
Bradley Blakeman

Mailing Address 6301 Chaucer View Circle

City State Zip Code  
Alexandria VA 22304

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

Name of Employer Occupation  
Rent Strategies, LLC CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 19 / 2009

Transaction ID: SA11AI.9356

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Kirk Blalock

Mailing Address 600 New Hampshire Avenue, NW

City State Zip Code  
Washington DC 22302

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

Name of Employer Occupation  
Fierce, Isakowitz, and As- soc. Partner

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

Date of Receipt

M M / D D / Y Y Y Y  
09 / 28 / 2009

Transaction ID: SA11AI.9247

Amount of Each Receipt this Period

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: (check only one)	PAGE 7 / 95
	<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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Cesar Conda		Date of Receipt
	Mailing Address 901 7th Street, NW #200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Washington	DC	20001
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9450
Name of Employer Navigators Global		Occupation Principal	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms Jennifer M. Connelly		Date of Receipt
	Mailing Address 308 Dawnwood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Edgewater	MD	21307
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9130
Name of Employer Cephalon, Inc.		Occupation Director, Policy Development	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Manus Cooney		Date of Receipt
	Mailing Address 227 Massachussetts Avenue, NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Washigton	DC	20002
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9150
Name of Employer TCH Group		Occupation President and Partner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 8 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
Manus Cooney

Mailing Address 227 Massachussets Avenue, NE

City State Zip Code  
Washigton DC 20002

FEC ID number of contributing federal political committee. C

Name of Employer TCH Group      Occupation President and Partner

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 / 2 4 / 2 0 0 9

**Transaction ID:** SA11AI.9423

Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mark Disler

Mailing Address 1110 Vermont Ave, NW #1000

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. C

Name of Employer BKSH & Assoc      Occupation Principal

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 / 2 4 / 2 0 0 9

**Transaction ID:** SA11AI.9424

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Raissa Downs

Mailing Address 1212 New York Ave. NW #1050

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. C

Name of Employer Tarplin, Downs, and Young      Occupation Partner

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 0 9

**Transaction ID:** SA11AI.9224

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2000.00

**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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 9 / 95
	<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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Ken Duberstein	Date of Receipt MM / DD / YYYY 09 / 28 / 2009
	Mailing Address 2100 Pennsylvania Avenue, NW Suite 500	<b>Transaction ID:</b> SA11AI.9248
	City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation The Duberstein Group Chairman & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Deborah Elmore	Date of Receipt MM / DD / YYYY 07 / 25 / 2009
	Mailing Address 231 Fairfax park	<b>Transaction ID:</b> SA11AI.9151
	City State Zip Code Tuscaloosa AL 35406	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NHS Management, LLC VP Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James Gerrity	Date of Receipt MM / DD / YYYY 10 / 28 / 2009
	Mailing Address 11015 East Troon Mountain Road	<b>Transaction ID:</b> SA11AI.9317
	City State Zip Code Scottsdale AZ 85255	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NA retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
H.P. Goldfield

Mailing Address 2137 Bancroft Place, NW

City State Zip Code  
Washington DC 20008

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Stonebridge International Vice Chairman, Executive VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
11 / 19 / 2009

**Transaction ID:** SA11AI.9358

Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph Gressel

Mailing Address 4831 East Marsten

City State Zip Code  
Paradise Valley AS 85253

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
N/A Self Employed commodities trader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
11 / 19 / 2009

**Transaction ID:** SA11AI.9359

Amount of Each Receipt this Period 2000.00

**C.** Full Name (Last, First, Middle Initial)  
James Hawkins

Mailing Address 660 Pennsylvania Avenue, NW #201

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Alpine Group Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
07 / 25 / 2009

**Transaction ID:** SA11AI.9153

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 3000.00

**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 11 / 95
	<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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) David Hobbs	Date of Receipt MM / DD / YYYY 07 / 25 / 2009
	Mailing Address 101 Constitution Avenue, NW 900	<b>Transaction ID:</b> SA11AI.9154
	City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer The Hobbs Group      Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Hoffman	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2371 Queen Street South	<b>Transaction ID:</b> SA11AI.9451
	City State Zip Code Arlington VA 22202	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Cognizant Technology Solutions      Occupation VP Global Public Policy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Richard F. Hohlt	Date of Receipt MM / DD / YYYY 11 / 19 / 2009
	Mailing Address 7901 Kent Road	<b>Transaction ID:</b> SA11AI.9361
	City State Zip Code Alexandria VA 22308-1328	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Lorillard Tobacco Company      Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 95
	<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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) John Brad Holsclaw	Date of Receipt MM / DD / YYYY 07 / 25 / 2009
	Mailing Address 227 Massachusetts Avenue, NE	<b>Transaction ID:</b> SA11AI.9156
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation TCH Group, LLC Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. John W. Howard	Date of Receipt MM / DD / YYYY 09 / 28 / 2009
	Mailing Address 1317 F Street, N.W., #600	<b>Transaction ID:</b> SA11AI.9249
	City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Wexler & Walker President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Kathryn Huffard	Date of Receipt MM / DD / YYYY 09 / 28 / 2009
	Mailing Address 600 New Hampshire Ave, NW	<b>Transaction ID:</b> SA11AI.9250
	City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Fierce, Isakowitz, & Blacklock Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 95

(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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
STACEY HUGHES

Mailing Address 601 13TH STREET, NW #250

City State Zip Code  
WASHINGTON DC 20005

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

Name of Employer Occupation  
THE NICKLES GROUP PARTNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 25 / 2009

Transaction ID: SA11AI.9158

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Kate Hull

Mailing Address 600 New Hampshire Ave, NW #1000

City State Zip Code  
Washington DC 20037

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

Name of Employer Occupation  
Pierce, Isakowitz, and Block Dir, Government Affairs

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

Date of Receipt

M M / D D / Y Y Y Y  
09 / 28 / 2009

Transaction ID: SA11AI.9252

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark Isakowitz

Mailing Address 600 New Hampshire Avenue, NW #1000

City State Zip Code  
Washington DC 20171

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

Name of Employer Occupation  
Fierce, Isakowitz, and Block Partner

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

Date of Receipt

M M / D D / Y Y Y Y  
09 / 28 / 2009

Transaction ID: SA11AI.9253

Amount of Each Receipt this Period

1000.00

**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 14 / 95

(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

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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Tom C. Korologos

Mailing Address 500 8th Street, NW

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
TCK International CEO

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

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.9319

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Ronald Kuerbitz

Mailing Address 920 Winter Street

City State Zip Code  
Waltham MA 02451

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

Name of Employer Occupation  
Fresenius Medical Center Exec. Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

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

Transaction ID: SA11AI.9131

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Edward Kutler

Mailing Address 601 13th Street, NW, #410 South

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation  
Clark & Weinstock Managing Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.9425

Amount of Each Receipt this Period

1500.00

**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 15 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
Peter Licari

Mailing Address 200 Dryden Road Suite 2000

City State Zip Code  
Dresher PA 19025

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

Name of Employer Complete Healthcare Occupation President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
07 / 19 / 2009

Transaction ID: SA11AI.9133

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Arthur Lifson

Mailing Address 5816 Linden Square Court

City State Zip Code  
Rockville MD 20852

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

Name of Employer Art Lifson Consulting LLC Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
11 / 23 / 2009

Transaction ID: SA11AI.9377

Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Hon. Robert Livingston

Mailing Address 499 South Capitol Street

City State Zip Code  
Washington DC 20003

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

Name of Employer Livingston Group Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY  
07 / 19 / 2009

Transaction ID: SA11AI.9135

Amount of Each Receipt this Period: 500.00

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 95
	<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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Peter Madigan	Date of Receipt MM / DD / YYYY 09 / 28 / 2009
	Mailing Address 1300 Connecticut Ave, NW 6th Floor	<b>Transaction ID:</b> SA11AI.9254
	City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Peck, Madigan, Jones & Stewart Principal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Diane M. Major	Date of Receipt MM / DD / YYYY 08 / 12 / 2009
	Mailing Address 2232 Westwood Place	<b>Transaction ID:</b> SA11AI.9225
	City State Zip Code Falls Church VA 22043	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Bockorny Group Principal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Hazen Marshall	Date of Receipt MM / DD / YYYY 07 / 25 / 2009
	Mailing Address 601 13th Street, NW #250	<b>Transaction ID:</b> SA11AI.9159
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation The Nickles Group Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 17 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
Justin McCarthy

Mailing Address 1300 Connecticut Ave, NW  
Suite 600

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation  
Peck, Madigan, Jones, & Stewart Principal

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2009

**Transaction ID:** SA11AI.9256

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Meyer

Mailing Address 2506 Duxbury Place

City State Zip Code  
Alexandria VA 22308

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

Name of Employer Occupation  
The Duberstein Group, Inc. VP

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2009

**Transaction ID:** SA11AI.9258

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mark Nadeau

Mailing Address PO Box 390

City State Zip Code  
Cave Creek AZ 85327

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

Name of Employer Occupation  
DLA Piper Partner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 28 / 2009

**Transaction ID:** SA11AI.9320

Amount of Each Receipt this Period  
2500.00

**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 18 / 95  
(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
							17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial) Hon. Don Nickles		Date of Receipt MM / DD / YYYY 07 / 25 / 2009
Mailing Address 601 13th Street, NW 250N		Transaction ID: SA11AI.9160
City Washington	State Zip Code DC 20005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Nickles Group, LLC	Occupation Chairman	
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) Ms Helen R. Rhee		Date of Receipt MM / DD / YYYY 07 / 25 / 2009
Mailing Address 555 13th Street, N.W., #600W		Transaction ID: SA11AI.9162
City Washington	State Zip Code DC 20004	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer AMGEN Corp.	Occupation Director, Govt. Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Stephen Rizley		Date of Receipt MM / DD / YYYY 10 / 28 / 2009
Mailing Address 1550 West Deer Valley		Transaction ID: SA11AI.9322
City Phoenix	State Zip Code AZ 85207	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Cox Communications	Occupation Senior VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 95
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Rosedale		Date of Receipt
	Mailing Address 4700 Ashwood Drive #200		<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Cincinnati	OH	45241
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Communicare Healthcare Service		Occupation Founder and CEO	<b>Transaction ID:</b> SA11AI.9226
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) James Smith		Date of Receipt
	Mailing Address 1401 K Street NW Floor 12		<input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Smith-Free Group		Occupation Chairman	<b>Transaction ID:</b> SA11AI.9426
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) LINDA TARPLIN		Date of Receipt
	Mailing Address 1212 NEW YORK AVE. NW		<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	WASHINGTON	DC	20005
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer TARPLIN, DOWNS, AND YOUNG		Occupation PARTNER	<b>Transaction ID:</b> SA11AI.9228
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 20 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
David Taylor

Mailing Address 1737 H Street, NW #200

City Washington State DC Zip Code 20006

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

Name of Employer Capitol Solutions Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2009

Transaction ID: SA11AI.9259

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Timothy Trysla

Mailing Address 405 F Street

City Washington State DC Zip Code 20007

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

Name of Employer Alsten and Bird LLP Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2009

Transaction ID: SA11AI.9229

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Van Dyk

Mailing Address 304 South Van Dien Avenue

City Ridgewood State NJ Zip Code 07450

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

Name of Employer Van Dyk Healthcare Occupation President and CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 19 / 2009

Transaction ID: SA11AI.9137

Amount of Each Receipt this Period 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 21 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
Hon. Vin Weber

Mailing Address 601 13th Street, NW #410 South

City State Zip Code  
Washington DC 20005

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

Name of Employer Elaru and Weinstock Occupation Managing Partner

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 / 2 4 / 2 0 0 9

**Transaction ID:** SA11AI.9428

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Darren Willcox

Mailing Address 10711 Falls Pointe Drive

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Capitol Tax Partners Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 2 5 / 2 0 0 9

**Transaction ID:** SA11AI.9163

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Scott Wisniewski

Mailing Address 801 South Abe

City State Zip Code  
San Antonio TX 76403

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

Name of Employer Western Shamrock Occupation President and CEO

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 / 2 4 / 2 0 0 9

**Transaction ID:** SA11AI.9430

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

**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 / 95	
	(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"/> 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)  
Senate Majority Fund

A.

Full Name (Last, First, Middle Initial) Candida Wolff		Date of Receipt	
Mailing Address 555 13th Street		M M / D D / Y Y Y Y 09 / 28 / 2009	
City	State	Zip Code	Transaction ID: SA11AI.9260
Washington	DC	20004	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		1000.00	
Name of Employer Hogan and Harston	Occupation Partner	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	52750.00

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

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

FOR LINE NUMBER: PAGE 23 / 95

(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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
ACCENTURE PAC

Mailing Address 800 Connecticut Ave NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00300707

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  
10 / 28 / 2009

Transaction ID: SA11C.9299

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
ACE GROUP HOLDINGS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 436 Walnut Street  
WAO4P

City State Zip Code  
Philadelphia PA 19106

FEC ID number of contributing federal political committee. **C** C00348938

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  
08 / 12 / 2009

Transaction ID: SA11C.9232

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
ADVOCAT INC. POLITICAL ACTION COMMITTEE

Mailing Address 1621 Galleria Blvd

City State Zip Code  
Brentwood TN 37027

FEC ID number of contributing federal political committee. **C** C00421735

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  
07 / 18 / 2009

Transaction ID: SA11C.9117

Amount of Each Receipt this Period

1000.00

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

3000.00

**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 / 95  
(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)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
AETNA INC POLITICAL ACTION COMMITTEE (FKA AETNA LIFE AND CASUALTY...)

Mailing Address 151 FARMINGTON AVENUE

City State Zip Code  
HARTFORD CT 06156

FEC ID number of contributing federal political committee. **C** C00181826

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 12 / 2009

**Transaction ID:** SA11C.9187

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
AETNA INC POLITICAL ACTION COMMITTEE (FKA AETNA LIFE AND CASUALTY...)

Mailing Address 151 FARMINGTON AVENUE

City State Zip Code  
HARTFORD CT 06156

FEC ID number of contributing federal political committee. **C** C00181826

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  
10 / 28 / 2009

**Transaction ID:** SA11C.9303

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLAC PAC

Mailing Address 1932 WYNNTON ROAD

City State Zip Code  
COLUMBUS GA 31999

FEC ID number of contributing federal political committee. **C** C00034157

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  
10 / 28 / 2009

**Transaction ID:** SA11C.9300

Amount of Each Receipt this Period  
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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 95

(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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC

Mailing Address 1932 WYNNTON ROAD

City State Zip Code  
COLUMBUS GA 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  

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

Transaction ID: SA11C.9336

Amount of Each Receipt this Period  
3000.00

**B.**

Full Name (Last, First, Middle Initial)  
ALLSTATE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 2775 Sanders Road  
SUITE A4

City State Zip Code  
Northbrook IL 60062

FEC ID number of contributing federal political committee. **C** C00040253

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
0	8	/	1	2	/	2	0	0	9

Transaction ID: SA11C.9188

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 Constitution Ave NW  
Suite 400W

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00089136

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
1	2	/	2	8	/	2	0	0	9

Transaction ID: SA11C.9410

Amount of Each Receipt this Period  
1500.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 95  
(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)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKIN PAC)

Mailing Address 1445 New York Avenue NW  
Ste 800

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. C C00359539

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  
1 0 / 2 8 / 2 0 0 9

**Transaction ID:** SA11C.9301

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 Preston White Drive

City State Zip Code  
Reston VA 20191

FEC ID number of contributing federal political committee. C C00343459

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  
0 8 / 1 2 / 2 0 0 9

**Transaction ID:** SA11C.9189

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave., NW  
Suite 700

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. C C00147066

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  
0 8 / 1 2 / 2 0 0 9

**Transaction ID:** SA11C.9191

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 3000.00

**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 27 / 95

(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)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN DENTAL POLITICAL ACTION CMTE.  
Mailing Address 1111 14th Street NW  
Suite 1100  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00000729  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 4 / 2 0 0 9  
Transaction ID: SA11C.9432  
Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE (AHCA-PAC)  
Mailing Address 1201 L STREET NW  
City WASHINGTON State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00006080  
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  
0 8 / 1 2 / 2 0 0 9  
Transaction ID: SA11C.9193  
Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN HOTEL AND LODGING ASSOCIATION PAC  
Mailing Address 1201 New York Avenue NW  
Sixth Floor  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00001198  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 0 / 2 0 0 9  
Transaction ID: SA11C.9339  
Amount of Each Receipt this Period  
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 95
	<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)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address Palladian 1  
220 Leigh Farm Rd

City Durham State NC Zip Code 27707

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 MM / DD / YYYY  
11 / 19 / 2009

**Transaction ID:** SA11C.9349

Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1130 Connecticut Avenue NW  
Suite 1000

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00103143

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
07 / 18 / 2009

**Transaction ID:** SA11C.9116

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 Prince Street  
Suite 300

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
08 / 12 / 2009

**Transaction ID:** SA11C.9194

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

**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 29 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 555 13th Street  
Suite 600 West

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 0 9

**Transaction ID:** SA11C.9196

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 555 13th Street  
Suite 600 West

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00251876

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  
1 2 / 2 3 / 2 0 0 9

**Transaction ID:** SA11C.9411

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
ANADARKO PETROLEUM CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1201 Lake Robbins Drive

City The Woodlands State TX Zip Code 77380

FEC ID number of contributing federal political committee. **C** C00231951

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 0 9

**Transaction ID:** SA11C.9197

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

**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 30 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
ARENTE FOX PLLC PAC (AFPAC)

Mailing Address Arent Fox PLLC  
1050 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00241380

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
1	2	/	2	4	/	2	0	0	9

**Transaction ID:** SA11C.9433

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
BANK OF AMERICA CORPORATION STATE AND FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 600 Peachtree Street NE  
3rd Floor

City State Zip Code  
Atlanta GA 30308

FEC ID number of contributing federal political committee. **C** C00043489

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
1	2	/	0	7	/	2	0	0	9

**Transaction ID:** SA11C.9391

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
BASF CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 100 Campus Drive

City State Zip Code  
Florham Park NJ 07932

FEC ID number of contributing federal political committee. **C** C00340075

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
1	2	/	2	2	/	2	0	0	9

**Transaction ID:** SA11C.9408

Amount of Each Receipt this Period  
5000.00

**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 31 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
BIOGEN IDEC POLITICAL ACTION COMMITTEE

Mailing Address 14 Cambridge Center

City State Zip Code  
Cambridge MA 02142

FEC ID number of contributing federal political committee. C C00390351

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
07 / 19 / 2009

**Transaction ID:** SA11C.9118

Amount of Each Receipt this Period 2000.00

**B.** Full Name (Last, First, Middle Initial)  
BIOTECHNOLOGY INDUSTRY ORGANIZATION PAC (BIO PAC)

Mailing Address 1225 Eye Street N.W. Suite 400  
SUITE 400

City State Zip Code  
Washington DC 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 MM / DD / YYYY  
08 / 12 / 2009

**Transaction ID:** SA11C.9199

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
BLANK ROME PAC

Mailing Address 600 New Hampshire Avenue NW

City State Zip Code  
Washington DC 20037

FEC ID number of contributing federal political committee. C C00150797

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
11 / 23 / 2009

**Transaction ID:** SA11C.9365

Amount of Each Receipt this Period 1000.00

**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 32 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION POLITICAL ACTION COMMITTEE  
 Mailing Address 1310 G STREET NW  
 City WASHINGTON State DC Zip Code 20005  
 Date of Receipt MM / DD / YYYY 08 / 07 / 2009  
**Transaction ID:** SA11C.9186  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C** C00194746  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION POLITICAL ACTION COMMITTEE  
 Mailing Address 1310 G STREET NW  
 City WASHINGTON State DC Zip Code 20005  
 Date of Receipt MM / DD / YYYY 11 / 12 / 2009  
**Transaction ID:** SA11C.9348  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C** C00194746  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

**C.** Full Name (Last, First, Middle Initial)  
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE  
 Mailing Address 50 BEALE STREET 18TH FLOOR  
 City SAN FRANCISCO State CA Zip Code 94105  
 Date of Receipt MM / DD / YYYY 07 / 19 / 2009  
**Transaction ID:** SA11C.9120  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C** C00340364  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**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 33 / 95  
(check only one)

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<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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
BOEING POLITICAL ACTION COMMITTEE

Mailing Address 1200 Wilson Blvd

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 21 / 2009

**Transaction ID:** SA11C.9407

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('BSC PAC')

Mailing Address ONE BOSTON SCIENTIFIC PLACE

City State Zip Code  
NATICK MA 01760

FEC ID number of contributing federal political committee. **C** C00357863

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2009

**Transaction ID:** SA11C.9304

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address 1680 Capital One Drive  
Attn: 19050-1204

City State Zip Code  
McLean VA 22102

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
12 / 07 / 2009

**Transaction ID:** SA11C.9392

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**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 34 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
CAREMARK RX INC. EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 2211 Sanders Road 10th Floor

City State Zip Code  
Northbrook IL 60062

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 0 9

**Transaction ID:** SA11C.9200

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE, THE

Mailing Address 701 Pennsylvania Avenue, NW  
Suite 750

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00039578

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  
0 7 / 2 5 / 2 0 0 9

**Transaction ID:** SA11C.9139

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
COVENTRY HEALTH CARE INC.-FIRST HEALTH GROUP CORP. PAC

Mailing Address 901 New York Avenue NW Third Floor

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00217216

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  
0 8 / 1 2 / 2 0 0 9

**Transaction ID:** SA11C.9201

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

**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 35 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
CREDIT SUISSE SECURITIES (USA) POLITICAL ACTION COMMITTEE

Mailing Address 1155 21st Street NW  
Suite 300

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00111559

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
1	0	/	0	9	/	2	0	0	9

**Transaction ID:** SA11C.9294

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
DELOITTE & TOUCHE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address P.O. Box 365

City State Zip Code  
Washington DC 20044

FEC ID number of contributing federal political committee. **C** C00211318

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
1	2	/	1	5	/	2	0	0	9

**Transaction ID:** SA11C.9404

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
DIRECT SUPPLY INC. PARTNERS PAC (DSI PARTNERS PAC)

Mailing Address 6767 North Industrial Road

City State Zip Code  
Milwaukee WI 53223

FEC ID number of contributing federal political committee. **C** C00409516

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
0	7	/	1	9	/	2	0	0	9

**Transaction ID:** SA11C.9121

Amount of Each Receipt this Period  
1000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
DLA PIPER RUDNICK GRAY CARY US LLP POLITICAL ACTION COMMITTEE (DLA PIPER PAC)

Mailing Address 1200 19th Street NW  
Suite 700

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	9

**Transaction ID:** SA11C.9305

Amount of Each Receipt this Period  
4000.00

**B.** Full Name (Last, First, Middle Initial)  
DLA PIPER RUDNICK GRAY CARY US LLP POLITICAL ACTION COMMITTEE (DLA PIPER PAC)

Mailing Address 1200 19th Street NW  
Suite 700

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00151340

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
1	2	/	2	4	/	2	0	0	9

**Transaction ID:** SA11C.9434

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
DUKE ENERGY CORPORATION POLITICAL ACTION COMMITTEE-FEDERAL 'DUKEPAC'

Mailing Address 422 SOUTH CHURCH STREET PBO5E

City State Zip Code  
CHARLOTTE NC 28242

FEC ID number of contributing federal political committee. **C** C00083535

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
1	2	/	0	7	/	2	0	0	9

**Transaction ID:** SA11C.9393

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

**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 37 / 95

(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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
EBAY INC-COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE

Mailing Address 228 S. Washington St.  
Ste. 115

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00342394

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  
08 / 12 / 2009

Transaction ID: SA11C.9202

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
ECHOSTAR CORPORATION AND DISH NETWORK CORPORATION PAC

Mailing Address 1110 Vermont Avenue NW Suite 750

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00330647

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  
10 / 28 / 2009

Transaction ID: SA11C.9306

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 3699 WILSHIRE BLVD., #1290

City State Zip Code  
LOS ANGELES CA 90010

FEC ID number of contributing federal political committee. **C** C00088591

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 / 07 / 2009

Transaction ID: SA11C.9400

Amount of Each Receipt this Period

5000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 95

(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1225 CONNECTICUT AVE NW SUITE 800

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 ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 9

**Transaction ID:** SA11C.9362

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
EXPRESS SCRIPTS INC. POLITICAL FUND (A/K/A EXPRESS SCRIPTS PAC)

Mailing Address One Express Way

City State Zip Code  
St. Louis MO 63121

FEC ID number of contributing federal political committee. **C** C00365072

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  
0 8 / 1 2 / 2 0 0 9

**Transaction ID:** SA11C.9203

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
FARMERS GROUP, INC. POLITICAL ACTION COMMITTEE

Mailing Address 2350 KERNER BLVD., SUITE 250

City State Zip Code  
SAN RAFAEL CA 94901

FEC ID number of contributing federal political committee. **C** C00135681

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 9

**Transaction ID:** SA11C.9122

Amount of Each Receipt this Period  
2000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
FINANCIAL SERVICES ROUNDTABLE PAC

Mailing Address 1001 Pennsylvania Avenue NW  
Suite 500 South

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt MM / DD / YYYY  
10 / 28 / 2009

**Transaction ID:** SA11C.9308

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
FINANCIAL SERVICES ROUNDTABLE PAC

Mailing Address 1001 Pennsylvania Avenue NW  
Suite 500 South

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
12 / 24 / 2009

**Transaction ID:** SA11C.9412

Amount of Each Receipt this Period 1500.00

**C.** Full Name (Last, First, Middle Initial)  
FMR LLC POLITICAL ACTION COMMITTEE (FIDELITY PAC)

Mailing Address 82 Devonshire Street  
N5A

City Boston State MA Zip Code 02109

FEC ID number of contributing federal political committee. **C** C00215046

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
12 / 24 / 2009

**Transaction ID:** SA11C.9435

Amount of Each Receipt this Period 1500.00

**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 40 / 95  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
FPL PAC, FLORIDA POWER & LIGHT CO. EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 700 UNIVERSE BLVD.  
P.O. BOX 14000

City State Zip Code  
JUNO BEACH FL 33408

FEC ID number of contributing federal political committee. **C** C00064774

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 7 / 2 0 0 9

Transaction ID: SA11C.9394

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
FPL PAC, FLORIDA POWER & LIGHT CO. EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 700 UNIVERSE BLVD.  
P.O. BOX 14000

City State Zip Code  
JUNO BEACH FL 33408

FEC ID number of contributing federal political committee. **C** C00064774

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 2 / 2 0 0 9

Transaction ID: SA11C.9409

Amount of Each Receipt this Period  
4000.00

**C.** Full Name (Last, First, Middle Initial)  
GENENTECH INC. POLITICAL ACTION COMMITTEE

Mailing Address 1 DNA Way

City State Zip Code  
So. San Francisco CA 94080

FEC ID number of contributing federal political committee. **C** C00199257

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  
0 8 / 1 2 / 2 0 0 9

Transaction ID: SA11C.9204

Amount of Each Receipt this Period  
1000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 95  
(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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial) GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 07 / 24 / 2009
Mailing Address 1299 Pennsylvania Ave NW STE 1100		<b>Transaction ID:</b> SA11C.9115
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. <b>C</b> C00024869		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

**B.**

Full Name (Last, First, Middle Initial) GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 11 / 23 / 2009
Mailing Address 1299 Pennsylvania Ave NW STE 1100		<b>Transaction ID:</b> SA11C.9366
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. <b>C</b> C00024869		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

**C.**

Full Name (Last, First, Middle Initial) GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 12 / 24 / 2009
Mailing Address 1299 Pennsylvania Ave NW STE 1100		<b>Transaction ID:</b> SA11C.9413
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. <b>C</b> C00024869		Amount of Each Receipt this Period 2000.00
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	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 42 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Date of Receipt: MM / DD / YYYY  
07 / 19 / 2009

Mailing Address 101 EAST STATE STREET

Transaction ID: SA11C.9124

City State Zip Code  
KENNETT SQUARE PA 19348

Amount of Each Receipt this Period  
2000.00

FEC ID number of contributing federal political committee. **C** C00292094

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

**B.** Full Name (Last, First, Middle Initial)  
GENWORTH FINANCIAL INC POLITICAL ACTION COMMITTEE

Date of Receipt: MM / DD / YYYY  
11 / 23 / 2009

Mailing Address 6620 W. Broad Street

Transaction ID: SA11C.9367

City State Zip Code  
Richmond VA 23230

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee. **C** C00404194

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Godaddy.com PAC

Date of Receipt: MM / DD / YYYY  
12 / 24 / 2009

Mailing Address 14455 North Hayden Road Suite 219

Transaction ID: SA11C.9414

City State Zip Code  
Scottsdale AZ 85260

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee. **C** C00432328

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

**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 43 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
GRIDIRON-PAC

Mailing Address 280 Park Avenue

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00451153

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 1 / 1 0 / 2 0 0 9

**Transaction ID:** SA11C.9337

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
HARTFORD FINANCIAL SERVICES GROUP INC ADVOCATES FUND FKA (HARTFORD ADVOCATES FUND)

Mailing Address HARTFORD PLAZA  
HARTFORD PLAZA

City State Zip Code  
HARTFORD CT 06115

FEC ID number of contributing federal political committee. **C** C00168864

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 2 5 / 2 0 0 9

**Transaction ID:** SA11C.9141

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
HCR MANOR CARE PAC

Mailing Address 333 NORTH SUMMIT STREET 16TH FLOOR

City State Zip Code  
TOLEDO OH 43699

FEC ID number of contributing federal political committee. **C** C00260141

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  
0 7 / 1 9 / 2 0 0 9

**Transaction ID:** SA11C.9125

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9500.00**

**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 44 / 95  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE (HIPAC)

Mailing Address 1001 Pennsylvania Avenue  
Suite 700

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 30 / 2009

**Transaction ID:** SA11C.9442

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
HUMANA INC. POLITICAL ACTION COMMITTEE

Mailing Address 1776 EYE STREET NW  
Suite 890

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00271007

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2009

**Transaction ID:** SA11C.9309

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
HUMANA INC. POLITICAL ACTION COMMITTEE

Mailing Address 1776 EYE STREET NW  
Suite 890

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00271007

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 24 / 2009

**Transaction ID:** SA11C.9436

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7500.00

**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 45 / 95

(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)  
Senate Majority Fund

<b>A.</b> Full Name (Last, First, Middle Initial) INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC) Mailing Address 412 First Street SE Suite 300 City State Zip Code Washington DC 20003 FEC ID number of contributing federal political committee. <b>C</b> C00022343 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 4 / 2 0 0 9 <b>Transaction ID:</b> SA11C.9415 Amount of Each Receipt this Period 1500.00
	Aggregate Year-to-Date ▼ 5000.00

<b>B.</b> Full Name (Last, First, Middle Initial) INTERNATIONAL FOODSERVICE DISTRIBUTORS ASSOCIATION POLITICAL ACTION COMMITTEE (IFDAPAC) Mailing Address 201 PARK WASHINGTON COURT City State Zip Code FALLS CHURCH VA 22046 FEC ID number of contributing federal political committee. <b>C</b> C00383521 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 3 / 2 0 0 9 <b>Transaction ID:</b> SA11C.9369 Amount of Each Receipt this Period 1000.00
	Aggregate Year-to-Date ▼ 2000.00

<b>C.</b> Full Name (Last, First, Middle Initial) INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC) Mailing Address 1401 H STREET NW SUITE 1200 City State Zip Code WASHINGTON DC 20005 FEC ID number of contributing federal political committee. <b>C</b> C00105981 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 0 / 2 0 0 9 <b>Transaction ID:</b> SA11C.9341 Amount of Each Receipt this Period 1000.00
	Aggregate Year-to-Date ▼ 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 95

(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

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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) JACOBS GOOD GOVERNMENT FUND OF JACOBS ENGINEERING GROUP INC. Mailing Address 1111 South Arroyo Parkway City State Zip Code Pasadena CA 91105 FEC ID number of contributing federal political committee. <b>C</b> C00142299 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	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 9 Transaction ID: SA11C.9310 Amount of Each Receipt this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) JP Morgan Chase and CO PAC Mailing Address 10 South Dearborn Street City State Zip Code Chicago IL 60603 FEC ID number of contributing federal political committee. <b>C</b> C00128512 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	Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 9 Transaction ID: SA11C.9246 Amount of Each Receipt this Period 1000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) KINDRED HEALTHCARE INC. POLITICAL ACTION COMMITTEE Mailing Address 680 South Fourth Avenue ONE VENCOR PLACE City State Zip Code Louisville KY 40202 FEC ID number of contributing federal political committee. <b>C</b> C00242271 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	Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 0 9 Transaction ID: SA11C.9205 Amount of Each Receipt this Period 2500.00

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

4500.00

**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 47 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
KPMG PARTNERS/PRINCIPALS & EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 18254

City State Zip Code  
WASHINGTON DC 20036

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  
MM / DD / YYYY  
12 / 24 / 2009

**Transaction ID:** SA11C.9416

Amount of Each Receipt this Period  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
LIFE TECHNOLOGIES CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1050 K Street NW, Suite 310  
Suite #580 South

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00404442

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
11 / 19 / 2009

**Transaction ID:** SA11C.9350

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
LOEWS CORPORATION PUBLIC AFFAIRS COMMITTEE

Mailing Address 667 MADISON AVENUE  
ATT: CORPORATE SECRETARY

City State Zip Code  
NEW YORK NY 10021

FEC ID number of contributing federal political committee. **C** C00416495

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 19 / 2009

**Transaction ID:** SA11C.9352

Amount of Each Receipt this Period  
1000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
MEDCO HEALTH SOLUTIONS INC POLITICAL ACTION COMMITTEE (AKA: MEDCO HEALTH PAC)

Mailing Address 591 Redwood Hwy. #4000  
MAIL STOP E3-13

City State Zip Code  
Mill Valley CA 94941

FEC ID number of contributing federal political committee. **C** C00384362

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
1	1	/	1	0	/	2	0	0	9

**Transaction ID:** SA11C.9342

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
MEDTRONIC INC. MEDICAL TECHNOLOGY FUND

Mailing Address 1420 New York Avenue NW Suite 600

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00311878

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
0	7	/	2	5	/	2	0	0	9

**Transaction ID:** SA11C.9142

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A

Mailing Address 27-01 Queens Plaza North  
Area 4D

City State Zip Code  
Long Island City NY 11101

FEC ID number of contributing federal political committee. **C** C00040923

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
0	8	/	1	2	/	2	0	0	9

**Transaction ID:** SA11C.9206

Amount of Each Receipt this Period  
1000.00

**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 49 / 95

(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)  
Senate Majority Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A</p> <p>Mailing Address 27-01 Queens Plaza North Area 4D</p> <p>City State Zip Code Long Island City NY 11101</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00040923</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 3000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 9</p> <p><b>Transaction ID:</b> SA11C.9445</p> <p>Amount of Each Receipt this Period 2000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MILLERCOORS LLC PAC</p> <p>Mailing Address 1501 M Street NW Suite 330</p> <p>City State Zip Code Washington DC 20005</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00457697</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p><b>Transaction ID:</b> SA11C.9446</p> <p>Amount of Each Receipt this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE</p> <p>Mailing Address 1919 Pennsylvania Ave NW 8th Floor</p> <p>City State Zip Code Washington DC 20006</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00004812</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 3 / 2 0 0 9</p> <p><b>Transaction ID:</b> SA11C.9370</p> <p>Amount of Each Receipt this Period 2500.00</p>

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 95

(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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
MUTUAL OF OMAHA COMPANIES PAC (IMPAC)

Mailing Address Mutual of Omaha Plaza

City State Zip Code  
Omaha NE 68175

FEC ID number of contributing federal political committee. C C00094581

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  
12 / 07 / 2009

**Transaction ID:** SA11C.9395

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Mailing Address P. O. Box 7135

City State Zip Code  
Washington DC 20044

FEC ID number of contributing federal political committee. C C00283135

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  
08 / 12 / 2009

**Transaction ID:** SA11C.9207

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address 3601 Vincennes Road  
PO Box 68700

City State Zip Code  
Indianapolis IN 46268

FEC ID number of contributing federal political committee. C C00170258

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  
10 / 21 / 2009

**Transaction ID:** SA11C.9297

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 3000.00

**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 51 / 95
	<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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC	Date of Receipt MM / DD / YYYY 12 / 15 / 2009
	Mailing Address 3601 Vincennes Road PO Box 68700	<b>Transaction ID:</b> SA11C.9405
	City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00170258	
	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	

<b>B.</b>	Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS INC. POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 11 / 10 / 2009
	Mailing Address 1875 Eye Street NW Suite 600	<b>Transaction ID:</b> SA11C.9343
	City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00303339	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 12 / 07 / 2009
	Mailing Address 1101 King Street Suite 600	<b>Transaction ID:</b> SA11C.9397
	City Alexandria State VA Zip Code 22314	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00144766	
	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	

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

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

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

FOR LINE NUMBER: PAGE 52 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTAC) Receipt  
Mailing Address 1724 MASSACHUSETTS AVENUE NW  
 City State Zip Code  
 WASHINGTON DC 20036  
 Date of Receipt: M M / D D / Y Y Y Y Y  
 12 / 07 / 2009  
**Transaction ID:** SA11C.9399  
 Amount of Each Receipt this Period  
 2500.00  
 FEC ID number of contributing federal political committee. **C** C00010082  
 Name of Employer Occupation  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC  
Mailing Address 100 Daingerfield Road  
 City State Zip Code  
 Alexandria VA 22314  
 Date of Receipt: M M / D D / Y Y Y Y Y  
 11 / 23 / 2009  
**Transaction ID:** SA11C.9371  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C** C00030809  
 Name of Employer Occupation  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL INSTALLMENT LENDERS ASSOCIATION PAC (NILA PAC)  
Mailing Address P.O. BOX 65615  
 City State Zip Code  
 Washington DC 20035  
 Date of Receipt: M M / D D / Y Y Y Y Y  
 12 / 24 / 2009  
**Transaction ID:** SA11C.9417  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C** C00465211  
 Name of Employer Occupation  
 Receipt For:  Primary  General  
 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) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ROOFING CONTRACTORS ASSOCIATION (ROOFPAC)  
 Mailing Address 324 FOURTH STREET NE  
 City State Zip Code  
 WASHINGTON DC 20002  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 8 / 2 0 0 9  
**Transaction ID:** SA11C.9312  
 Amount of Each Receipt this Period  
 1500.00  
 FEC ID number of contributing federal political committee. **C** C00244863  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL SURGICAL HOSPITALS INC. PAC  
 Mailing Address 30 South Wacker Drive Suite 2302  
 City State Zip Code  
 Chicago IL 60606  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 1 2 / 2 0 0 9  
**Transaction ID:** SA11C.9208  
 Amount of Each Receipt this Period  
 2000.00  
 FEC ID number of contributing federal political committee. **C** C00435453  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC  
 Mailing Address 1655 N. Fort Myer Dr. Suite 850  
 City State Zip Code  
 Arlington VA 22209  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 8 / 2 0 0 9  
**Transaction ID:** SA11C.9313  
 Amount of Each Receipt this Period  
 2500.00  
 FEC ID number of contributing federal political committee. **C** C00150367  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 95  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2009

Mailing Address 51 Madison Ave.  
Room 1109

Transaction ID: SA11C.9126

City State Zip Code  
New York NY 10010

Amount of Each Receipt this Period  
1000.00

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Date of Receipt  
MM / DD / YYYY  
12 / 15 / 2009

Mailing Address 51 Madison Ave.  
Room 1109

Transaction ID: SA11C.9406

City State Zip Code  
New York NY 10010

Amount of Each Receipt this Period  
4000.00

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

**C.** Full Name (Last, First, Middle Initial)  
NOVARTIS CORPORATION POLITICAL ACTION COMMITTEE (A.K.A. NOVARTIS PAC)

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2009

Mailing Address 701 Pennsylvania Ave. NW  
Suite 725

Transaction ID: SA11C.9209

City State Zip Code  
Washington DC 20004

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee. **C** C00033969

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
ORBITAL SCIENCES CORPORATION POLITICAL ACTION COMMITTEE (ORBPAC)

Mailing Address 21839 Atlantic Blvd.  
4th Floor

City State Zip Code  
Dulles VA 20166

FEC ID number of contributing federal political committee. **C** C00195263

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	9

**Transaction ID:** SA11C.9314

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
PEPSICO, INC. CONCERNED CITIZENS FUND

Mailing Address 700 Anderson Hill Road

City State Zip Code  
Purchase NY 10577

FEC ID number of contributing federal political committee. **C** C00039321

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
0	8	/	1	2	/	2	0	0	9

**Transaction ID:** SA11C.9210

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)

Mailing Address 601 PENNSYLVANIA AVENUE NW STE 740

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00388819

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
0	8	/	1	2	/	2	0	0	9

**Transaction ID:** SA11C.9212

Amount of Each Receipt this Period  
500.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 711 HIGH ST/GOVERNMENT RELATIONS

City State Zip Code  
DES MOINES IA 50392

FEC ID number of contributing federal political committee. **C** C00128918

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  
 08 / 12 / 2009

**Transaction ID:** SA11C.9213

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 2600 South River Road

City State Zip Code  
Des Plaines IL 60018

FEC ID number of contributing federal political committee. **C** C00066472

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  
 11 / 19 / 2009

**Transaction ID:** SA11C.9354

Amount of Each Receipt this Period  
4000.00

**C.** Full Name (Last, First, Middle Initial)  
PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL PAC)

Mailing Address 751 Broad Street  
3RD FLOOR PRUDENTIAL PLAZA

City State Zip Code  
Newark NJ 07102

FEC ID number of contributing federal political committee. **C** C00127779

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  
 12 / 31 / 2009

**Transaction ID:** SA11C.9448

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7500.00

**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 57 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 141 Spring Street

City State Zip Code  
Lexington MA 02421

FEC ID number of contributing federal political committee. **C** C00097568

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  
 1 2 / 2 4 / 2 0 0 9

**Transaction ID:** SA11C.9437

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
RECORDING INDUSTRY ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE, THE

Mailing Address 1025 F Street NW  
10th Floor

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00009357

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  
 0 8 / 1 2 / 2 0 0 9

**Transaction ID:** SA11C.9215

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
SAFEWAY INC. POLITICAL ACTION COMMITTEE (SAFEWAY PAC)

Mailing Address 5918 Stoneridge Mall Road

City State Zip Code  
Pleasanton CA 94588

FEC ID number of contributing federal political committee. **C** C00194084

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  
 0 7 / 2 5 / 2 0 0 9

**Transaction ID:** SA11C.9143

Amount of Each Receipt this Period  
1000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
SENIORS HOUSING POLITICAL ACTION COMMITTEE  
 Mailing Address 5100 WISCONSIN AVENUE NW #307  
 City State Zip Code  
 WASHINGTON DC 20016  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 3 / 2 0 0 9  
**Transaction ID:** SA11C.9373  
 Amount of Each Receipt this Period  
 2500.00  
 FEC ID number of contributing federal political committee. **C** C00325332  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

**B.** Full Name (Last, First, Middle Initial)  
SOUTHERN COMPANY EMPLOYEES PAC  
 Mailing Address 241 RALPH MCGILL BOULEVARD NE  
 BIN 10111  
 City State Zip Code  
 ATLANTA GA 30308  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 3 0 / 2 0 0 9  
**Transaction ID:** SA11C.9443  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C** C00144774  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
SOUTHERN COMPANY EMPLOYEES PAC  
 Mailing Address 241 RALPH MCGILL BOULEVARD NE  
 BIN 10111  
 City State Zip Code  
 ATLANTA GA 30308  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 3 0 / 2 0 0 9  
**Transaction ID:** SA11C.9444  
 Amount of Each Receipt this Period  
 4000.00  
 FEC ID number of contributing federal political committee. **C** C00144774  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7500.00  
**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 59 / 95  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
SPRINT NEXTEL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address KSOPHN0212-2A372  
6450 Sprint Parkway

City State Zip Code  
Overland Park KS 66251

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 24 / 2009

**Transaction ID:** SA11C.9438

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
STARWOOD HOTELS & RESORTS WORLDWIDE INC PAC (STARWOOD PAC)

Mailing Address 2231 E CAMELBACK RD SUITE 400

City State Zip Code  
PHOENIX AZ 85016

FEC ID number of contributing federal political committee. **C** C00219717

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
12 / 07 / 2009

**Transaction ID:** SA11C.9402

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
STINSON MORRISON HECKER POLITICAL ACTION COMMITTEE PAC

Mailing Address 1201 Walnut Street, Suite 2900

City State Zip Code  
Kansas City MO 64106

FEC ID number of contributing federal political committee. **C** C00459065

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 25 / 2009

**Transaction ID:** SA11C.9145

Amount of Each Receipt this Period  
1000.00

**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 60 / 95  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
SUN HEALTHCARE GROUP INC POLITICAL ACTION COMMITTEE/AKA SUN HEALTHCARE PAC

Mailing Address 101 Sun Avenue NE

City State Zip Code  
Albuquerque NM 87109

FEC ID number of contributing federal political committee. **C** C00398826

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2009

**Transaction ID:** SA11C.9127

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
TIME WARNER CABLE INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 800 Connecticut Ave. NW  
Suite 1200

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00431551

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2009

**Transaction ID:** SA11C.9315

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
TITLE INDUSTRY POLITICAL ACTION COMMITTEE

Mailing Address 1828 L Street, NW  
Suite 705

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 28 / 2009

**Transaction ID:** SA11C.9363

Amount of Each Receipt this Period  
1000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 95

(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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
TRAVELERS PROPERTY CASUALTY CORP. POLITICAL ACTION COMMITTEE (TAP PAC)

Mailing Address One Tower Square

City State Zip Code  
Hartford CT 06183

FEC ID number of contributing federal political committee. **C** C00376376

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2009

**Transaction ID:** SA11C.9128

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
UNION PACIFIC CORP FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13th St. NW  
Suite 340

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 07 / 2009

**Transaction ID:** SA11C.9403

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
UNITEDHEALTH GROUP INCORPORATED POLITICAL FUND

Mailing Address 9900 BREN ROAD EAST  
9900 BREN ROAD EAST

City State Zip Code  
MINNETONKA MN 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2009

**Transaction ID:** SA11C.9217

Amount of Each Receipt this Period  
1000.00

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

3000.00

**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 62 / 95
	<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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) UNITEDHEALTH GROUP INCORPORATED POLITICAL FUND	Date of Receipt MM / DD / YYYY 08 / 12 / 2009
	Mailing Address 9900 BREN ROAD EAST 9900 BREN ROAD EAST	<b>Transaction ID:</b> SA11C.9218
	City State Zip Code MINNETONKA MN 55343	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00274431	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) UNITEDHEALTH GROUP INCORPORATED POLITICAL FUND	Date of Receipt MM / DD / YYYY 11 / 23 / 2009
	Mailing Address 9900 BREN ROAD EAST 9900 BREN ROAD EAST	<b>Transaction ID:</b> SA11C.9375
	City State Zip Code MINNETONKA MN 55343	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00274431	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) UNITEDHEALTH GROUP INCORPORATED POLITICAL FUND	Date of Receipt MM / DD / YYYY 12 / 24 / 2009
	Mailing Address 9900 BREN ROAD EAST 9900 BREN ROAD EAST	<b>Transaction ID:</b> SA11C.9440
	City State Zip Code MINNETONKA MN 55343	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00274431	
	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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 63 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
UNITED HEALTH SERVICES PAC, INC.  
Mailing Address 211 East Doyle Street  
City Toccoa State GA Zip Code 30577  
FEC ID number of contributing federal political committee. **C** C00400135  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 07 / 25 / 2009  
Transaction ID: SA11C.9147  
Amount of Each Receipt this Period 2000.00

**B.** Full Name (Last, First, Middle Initial)  
UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC  
Mailing Address 9800 Fredericksburg Road ROOM 501  
City San Antonio State TX Zip Code 78288  
FEC ID number of contributing federal political committee. **C** C00164145  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 08 / 12 / 2009  
Transaction ID: SA11C.9219  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
UNIVERSAL AMERICAN CORP. PAC  
Mailing Address 6 INTERNATIONAL DRIVE SUITE 190  
City RYE BROOK State NY Zip Code 10573  
FEC ID number of contributing federal political committee. **C** C00433029  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 08 / 12 / 2009  
Transaction ID: SA11C.9220  
Amount of Each Receipt this Period 1000.00

**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 64 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
UNIVERSAL MUSIC GROUP POLITICAL ACTION COMMITTEE

Mailing Address 2220 COLORADO AVENUE

City State Zip Code  
SANTA MONICA CA 90404

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

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 1 / 1 0 / 2 0 0 9

**Transaction ID:** SA11C.9345

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
US ONCOLOGY INC GOOD GOVERNMENT COMMITTEE

Mailing Address 16825 NORTHCHASE DRIVE SUITE 1300

City State Zip Code  
HOUSTON TX 77060

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 1 9 / 2 0 0 9

**Transaction ID:** SA11C.9460

Amount of Each Receipt this Period  
650.00

In-kind -

**C.** Full Name (Last, First, Middle Initial)  
US ONCOLOGY INC GOOD GOVERNMENT COMMITTEE

Mailing Address 16825 NORTHCHASE DRIVE SUITE 1300

City State Zip Code  
HOUSTON TX 77060

FEC ID number of contributing federal political committee. **C** C00339655

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 1 / 2 3 / 2 0 0 9

**Transaction ID:** SA11C.9374

Amount of Each Receipt this Period  
4350.00

**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)  
for each category of the  
Detailed Summary Page

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(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)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATION INC GOOD GOV'T CLUB

Mailing Address 1717 Arch Street 47S  
1717 ARCH ST. 47S

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. C C00186288

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
10 / 06 / 2009

**Transaction ID:** SA11C.9295

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATION INC GOOD GOV'T CLUB

Mailing Address 1717 Arch Street 47S  
1717 ARCH ST. 47S

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. C C00186288

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
12 / 24 / 2009

**Transaction ID:** SA11C.9419

Amount of Each Receipt this Period 4000.00

**C.** Full Name (Last, First, Middle Initial)  
WAL-MART STORES INC PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8TH STREET

City BENTONVILLE State AR Zip Code 72716

FEC ID number of contributing federal political committee. C C00093054

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
11 / 10 / 2009

**Transaction ID:** SA11C.9347

Amount of Each Receipt this Period 1000.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 95  
(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)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
WAL-MART STORES INC PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8TH STREET

City State Zip Code  
BENTONVILLE AR 72716

FEC ID number of contributing federal political committee. **C** C00093054

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  
1 2 / 2 4 / 2 0 0 9

**Transaction ID:** SA11C.9441

Amount of Each Receipt this Period  
3000.00

**B.** 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 ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 0 9

**Transaction ID:** SA11C.9234

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE (XPAC)

Mailing Address 1225 17th Street, Suite 1000  
Suite 900

City State Zip Code  
Denver CO 80202

FEC ID number of contributing federal political committee. **C** C00107771

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  
1 2 / 2 4 / 2 0 0 9

**Transaction ID:** SA11C.9420

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	235000.00

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

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

FOR LINE NUMBER: PAGE 67 / 95

(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"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
Camelback Community Bank

Mailing Address 2777 E. Camelback Rd., Ste. 100

City State Zip Code  
Phoenix AZ 85253

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
618.93

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2009

Transaction ID: SA17.9165

Amount of Each Receipt this Period  
104.76

Bank Interest

**B.**

Full Name (Last, First, Middle Initial)  
Camelback Community Bank

Mailing Address 2777 E. Camelback Rd., Ste. 100

City State Zip Code  
Phoenix AZ 85253

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
729.42

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2009

Transaction ID: SA17.9166

Amount of Each Receipt this Period  
110.49

Bank Interest

**C.**

Full Name (Last, First, Middle Initial)  
Camelback Community Bank

Mailing Address 2777 E. Camelback Rd., Ste. 100

City State Zip Code  
Phoenix AZ 85253

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
836.27

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2009

Transaction ID: SA17.9238

Amount of Each Receipt this Period  
106.85

Bank Interest

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

322.10

**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 68 / 95

(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"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
Camelback Community Bank

Mailing Address 2777 E. Camelback Rd., Ste. 100

City State Zip Code  
Phoenix AZ 85253

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
942.33

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

Transaction ID: SA17.9270

Amount of Each Receipt this Period

106.06

Bank Interest

**B.**

Full Name (Last, First, Middle Initial)  
Camelback Community Bank

Mailing Address 2777 E. Camelback Rd., Ste. 100

City State Zip Code  
Phoenix AZ 85253

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.01

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 9

Transaction ID: SA17.9324

Amount of Each Receipt this Period

107.68

Bank Interest

**C.**

Full Name (Last, First, Middle Initial)  
Camelback Community Bank

Mailing Address 2777 E. Camelback Rd., Ste. 100

City State Zip Code  
Phoenix AZ 85253

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1134.47

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 9

Transaction ID: SA17.9453

Amount of Each Receipt this Period

84.46

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

298.20

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

620.30

**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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.9274 Date of Disbursement
	Mailing Address P.O. BOX 53136	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Phoenix State AZ Zip Code 85018	Amount of Each Disbursement this Period
	Purpose of Disbursement Catering	<input type="text" value="637.51"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) C2 Group LLC	Transaction ID: SB21B.9104 Date of Disbursement
	Mailing Address 101 Constitution Ave. NW Suite 900 West	<input type="text" value="07"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period
	Purpose of Disbursement Luncheon Catering	<input type="text" value="1242.35"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Camelback Community Bank	Transaction ID: SB21B.9179 Date of Disbursement
	Mailing Address 2777 E. Camelback Rd., Ste. 100	<input type="text" value="08"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Phoenix State AZ Zip Code 85253	Amount of Each Disbursement this Period
	Purpose of Disbursement Check printing	<input type="text" value="148.17"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2028.03"/>
<b>TOTAL</b> 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 70 / 95

<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)  
Senate Majority Fund

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) General Southwest Insurance Agency Inc,</p> <p>Mailing Address 5628 East Thomas</p> <p>City Phoenix State AZ Zip Code 85018</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.9094</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="219.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Mrs. Mitzi M. Haggard</p> <p>Mailing Address 1248 E. Victor Hugo Ave.</p> <p>City Phoenix State AZ Zip Code 85022</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.9114</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="235.49"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mrs. Mitzi M. Haggard</p> <p>Mailing Address 1248 E. Victor Hugo Ave.</p> <p>City Phoenix State AZ Zip Code 85022</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.9264</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="138.53"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) Mrs. Mitzi M. Haggard  Mailing Address 1248 E. Victor Hugo Ave.  City Phoenix State AZ Zip Code 85022  Purpose of Disbursement Wages 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) ▼	Transaction ID: SB21B.9331 Date of Disbursement 11 / 30 / 2009  Amount of Each Disbursement this Period 166.23
B.	Full Name (Last, First, Middle Initial) Mrs. Mitzi M. Haggard  Mailing Address 1248 E. Victor Hugo Ave.  City Phoenix State AZ Zip Code 85022  Purpose of Disbursement Wages 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) ▼	Transaction ID: SB21B.9388 Date of Disbursement 12 / 30 / 2009  Amount of Each Disbursement this Period 277.05
C.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE  Mailing Address POST OFFICE BOX 10246  City PHOENIX State AZ Zip Code 85064  Purpose of Disbursement SMF portion of Rent 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) ▼	Transaction ID: SB21B.9110 Date of Disbursement 07 / 26 / 2009  Amount of Each Disbursement this Period 600.30

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

1043.58

**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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE	Transaction ID: SB21B.9111 Date of Disbursement
	Mailing Address POST OFFICE BOX 10246	<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City PHOENIX State AZ Zip Code 85064	Amount of Each Disbursement this Period
	Purpose of Disbursement SMF portion of Telephone/Internet	<input type="text" value="117.50"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE	Transaction ID: SB21B.9112 Date of Disbursement
	Mailing Address POST OFFICE BOX 10246	<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City PHOENIX State AZ Zip Code 85064	Amount of Each Disbursement this Period
	Purpose of Disbursement SMF portion of equipment rental	<input type="text" value="55.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE	Transaction ID: SB21B.9181 Date of Disbursement
	Mailing Address POST OFFICE BOX 10246	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City PHOENIX State AZ Zip Code 85064	Amount of Each Disbursement this Period
	Purpose of Disbursement SMF portion of rent	<input type="text" value="600.30"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="772.80"/>
<b>TOTAL</b> 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)

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<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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE <hr/> Mailing Address POST OFFICE BOX 10246 <hr/> City PHOENIX State AZ Zip Code 85064 <hr/> Purpose of Disbursement SMF portion of telephone/internet Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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: SB21B.9182 Date of Disbursement 08 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 117.50
<b>B.</b>	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE <hr/> Mailing Address POST OFFICE BOX 10246 <hr/> City PHOENIX State AZ Zip Code 85064 <hr/> Purpose of Disbursement SMF portion of equipment rental Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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: SB21B.9183 Date of Disbursement 08 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 55.00
<b>C.</b>	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE <hr/> Mailing Address POST OFFICE BOX 10246 <hr/> City PHOENIX State AZ Zip Code 85064 <hr/> Purpose of Disbursement SMF Portion of RENT Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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: SB21B.9267 Date of Disbursement 09 / 28 / 2009 <hr/> Amount of Each Disbursement this Period 600.30

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	772.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE	Transaction ID: SB21B.9268 Date of Disbursement 09 / 28 / 2009
	Mailing Address POST OFFICE BOX 10246	Amount of Each Disbursement this Period 117.50
	City PHOENIX State AZ Zip Code 85064	
	Purpose of Disbursement SMF Portion of Telephone/Internet 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) ▼

B.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE	Transaction ID: SB21B.9269 Date of Disbursement 09 / 28 / 2009
	Mailing Address POST OFFICE BOX 10246	Amount of Each Disbursement this Period 55.00
	City PHOENIX State AZ Zip Code 85064	
	Purpose of Disbursement SMF portion of equipment rental 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) ▼

C.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE	Transaction ID: SB21B.9280 Date of Disbursement 10 / 29 / 2009
	Mailing Address POST OFFICE BOX 10246	Amount of Each Disbursement this Period 600.30
	City PHOENIX State AZ Zip Code 85064	
	Purpose of Disbursement SMF PAC portion of RENT 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>772.80</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Senate Majority Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE <hr/> Mailing Address POST OFFICE BOX 10246 <hr/> City PHOENIX State AZ Zip Code 85064 <hr/> Purpose of Disbursement SMF Portion of Telephone/Internet Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> SB21B.9281 Date of Disbursement 10 / 29 / 2009	Amount of Each Disbursement this Period 117.50
<b>B.</b>	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE <hr/> Mailing Address POST OFFICE BOX 10246 <hr/> City PHOENIX State AZ Zip Code 85064 <hr/> Purpose of Disbursement SMF portion of equipment rental Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> SB21B.9282 Date of Disbursement 10 / 29 / 2009	Amount of Each Disbursement this Period 55.00
<b>C.</b>	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE <hr/> Mailing Address POST OFFICE BOX 10246 <hr/> City PHOENIX State AZ Zip Code 85064 <hr/> Purpose of Disbursement SMF Portion of RENT Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> SB21B.9332 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 600.30

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

772.80

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE	Transaction ID: SB21B.9333 Date of Disbursement 11 / 30 / 2009
	Mailing Address POST OFFICE BOX 10246	Amount of Each Disbursement this Period 117.50
	City PHOENIX State AZ Zip Code 85064	
	Purpose of Disbursement SMF portion of telephone/internet 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) ▼

B.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE	Transaction ID: SB21B.9334 Date of Disbursement 11 / 30 / 2009
	Mailing Address POST OFFICE BOX 10246	Amount of Each Disbursement this Period 55.00
	City PHOENIX State AZ Zip Code 85064	
	Purpose of Disbursement SMF portion of equipment rental 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) ▼

C.	Full Name (Last, First, Middle Initial) JON KYL FOR U S SENATE	Transaction ID: SB21B.9384 Date of Disbursement 12 / 27 / 2009
	Mailing Address POST OFFICE BOX 10246	Amount of Each Disbursement this Period 600.30
	City PHOENIX State AZ Zip Code 85064	
	Purpose of Disbursement SMF Portion of RENT 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>772.80</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Senate Majority Fund

A.

Full Name (Last, First, Middle Initial)  
JON KYL FOR U S SENATE

Transaction ID: SB21B.9385  
Date of Disbursement

Mailing Address POST OFFICE BOX 10246

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

City PHOENIX State AZ Zip Code 85064

Amount of Each Disbursement this Period

117.50
--------

Purpose of Disbursement  
SMF portion of telephone/internet  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
JON KYL FOR U S SENATE

Transaction ID: SB21B.9386  
Date of Disbursement

Mailing Address POST OFFICE BOX 10246

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

City PHOENIX State AZ Zip Code 85064

Amount of Each Disbursement this Period

55.00
-------

Purpose of Disbursement  
SMF portion of equipment rental  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Mrs. Corinne C. Lovas

Transaction ID: SB21B.9092  
Date of Disbursement

Mailing Address 7197 West Mariposa Grande

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

City Peoria State AZ Zip Code 85383

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
SMF PAC Fundraising Consultant Fees  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

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

1672.50
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) Mrs. Corinne C. Lovas	Transaction ID: SB21B.9173 Date of Disbursement 08 / 08 / 2009
	Mailing Address 7197 West Mariposa Grande	Amount of Each Disbursement this Period 1500.00
	City Peoria State AZ Zip Code 85383	
	Purpose of Disbursement SMF PAC Fundraising Consultant Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mrs. Corinne C. Lovas	Transaction ID: SB21B.9262 Date of Disbursement 09 / 09 / 2009
	Mailing Address 7197 West Mariposa Grande	Amount of Each Disbursement this Period 1500.00
	City Peoria State AZ Zip Code 85383	
	Purpose of Disbursement SMF Pac Fundraising Consultant Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mrs. Corinne C. Lovas	Transaction ID: SB21B.9271 Date of Disbursement 10 / 08 / 2009
	Mailing Address 7197 West Mariposa Grande	Amount of Each Disbursement this Period 1500.00
	City Peoria State AZ Zip Code 85383	
	Purpose of Disbursement SMF PAC Fundraising Consultant Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) Mrs. Corinne C. Lovas	Transaction ID: SB21B.9329 Date of Disbursement 11 / 20 / 2009
	Mailing Address 7197 West Mariposa Grande	Amount of Each Disbursement this Period 1500.00
	City Peoria State AZ Zip Code 85383	
	Purpose of Disbursement SMF PAC Fundraising Consultant Fees 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) ▼

B.	Full Name (Last, First, Middle Initial) Mrs. Corinne C. Lovas	Transaction ID: SB21B.9378 Date of Disbursement 12 / 20 / 2009
	Mailing Address 7197 West Mariposa Grande	Amount of Each Disbursement this Period 1500.00
	City Peoria State AZ Zip Code 85383	
	Purpose of Disbursement SMF PAC Fundraising Consultant Fees 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) ▼

C.	Full Name (Last, First, Middle Initial) Mastercard	Transaction ID: SB21B.9275 Date of Disbursement 10 / 29 / 2009
	Mailing Address PO Box 13337	Amount of Each Disbursement this Period 255.41
	City Philadelphia State PA Zip Code 19101	
	Purpose of Disbursement Dinner Meeting SMF PAC 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3255.41</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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<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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) Mrs. Ashley Ragan	Transaction ID: SB21B.9113 Date of Disbursement 07 / 31 / 2009
	Mailing Address 307 East Royal Palm	Amount of Each Disbursement this Period 1530.95
	City Phoenix State AZ Zip Code 85020	
	Purpose of Disbursement Wages	
	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) ▼

B.	Full Name (Last, First, Middle Initial) Mrs. Ashley Ragan	Transaction ID: SB21B.9180 Date of Disbursement 08 / 31 / 2009
	Mailing Address 307 East Royal Palm	Amount of Each Disbursement this Period 554.10
	City Phoenix State AZ Zip Code 85020	
	Purpose of Disbursement Wages	
	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) ▼

C.	Full Name (Last, First, Middle Initial) Mrs. Ashley Ragan	Transaction ID: SB21B.9263 Date of Disbursement 09 / 28 / 2009
	Mailing Address 307 East Royal Palm	Amount of Each Disbursement this Period 1108.20
	City Phoenix State AZ Zip Code 85020	
	Purpose of Disbursement Wages	
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3193.25
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) Mrs. Ashley Ragan	Transaction ID: SB21B.9277 Date of Disbursement 10 / 29 / 2009
	Mailing Address 307 East Royal Palm	Amount of Each Disbursement this Period 692.62
	City Phoenix State AZ Zip Code 85020	
	Purpose of Disbursement Wages	
	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) ▼

B.	Full Name (Last, First, Middle Initial) Mrs. Ashley Ragan	Transaction ID: SB21B.9330 Date of Disbursement 11 / 30 / 2009
	Mailing Address 307 East Royal Palm	Amount of Each Disbursement this Period 1015.85
	City Phoenix State AZ Zip Code 85020	
	Purpose of Disbursement Wages	
	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) ▼

C.	Full Name (Last, First, Middle Initial) Mrs. Ashley Ragan	Transaction ID: SB21B.9387 Date of Disbursement 12 / 30 / 2009
	Mailing Address 307 East Royal Palm	Amount of Each Disbursement this Period 646.45
	City Phoenix State AZ Zip Code 85020	
	Purpose of Disbursement Wages	
	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) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 2354.92

**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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) Simplicity Catering	Transaction ID: SB21B.9106 Date of Disbursement 07 / 25 / 2009
	Mailing Address 6402 Arlington Blvd. Suite 150B	Amount of Each Disbursement this Period 2625.00
	City Falls Church State VA Zip Code 22042	
	Purpose of Disbursement Dinner Catering	
	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:	

B.	Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates	Transaction ID: SB21B.9093 Date of Disbursement 07 / 19 / 2009
	Mailing Address 507 Capitol Court NE #100	Amount of Each Disbursement this Period 3766.10
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement SMF PAC Fundraising Consultant Fees	
	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:	

C.	Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates	Transaction ID: SB21B.9108 Date of Disbursement 07 / 25 / 2009
	Mailing Address 507 Capitol Court NE #100	Amount of Each Disbursement this Period 12236.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement SMF PAC Fundraising Consultant Commission	
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>18627.10</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates  Mailing Address 507 Capitol Court NE #100  City Washington State DC Zip Code 20002  Purpose of Disbursement SMF PAC Fundraising Consultant Fees  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) ▼	Transaction ID: SB21B.9109 Date of Disbursement 07 / 25 / 2009  Amount of Each Disbursement this Period 4000.00  Category/Type
B.	Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates  Mailing Address 507 Capitol Court NE #100  City Washington State DC Zip Code 20002  Purpose of Disbursement SMF PAC Fundraising Consultant Fees  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) ▼	Transaction ID: SB21B.9184 Date of Disbursement 08 / 31 / 2009  Amount of Each Disbursement this Period 4000.00  Category/Type
C.	Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates  Mailing Address 507 Capitol Court NE #100  City Washington State DC Zip Code 20002  Purpose of Disbursement Reimb for SMF PAC catering/telephone/postage  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) ▼	Transaction ID: SB21B.9185 Date of Disbursement 08 / 31 / 2009  Amount of Each Disbursement this Period 5922.01  Category/Type

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

13922.01

**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)  
Senate Majority Fund

A.

Full Name (Last, First, Middle Initial)  
Steven H. Gordon & Associates

Transaction ID: SB21B.9265  
Date of Disbursement

Mailing Address 507 Capitol Court NE #100

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	9

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

1439.93
---------

Purpose of Disbursement  
Reimb for catering,phone,shipping SMF PAC

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
Steven H. Gordon & Associates

Transaction ID: SB21B.9266  
Date of Disbursement

Mailing Address 507 Capitol Court NE #100

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	9

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

4000.00
---------

Purpose of Disbursement  
SMF PAC Fundraising Consultant Fees

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Steven H. Gordon & Associates

Transaction ID: SB21B.9278  
Date of Disbursement

Mailing Address 507 Capitol Court NE #100

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

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

4000.00
---------

Purpose of Disbursement  
SMF PAC Fundraising Consultant Fees

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

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

9439.93
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TOTAL This Period (last page this line number only) .....

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# 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)  
Senate Majority Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Steven H. Gordon &amp; Associates</p> <p>Mailing Address 507 Capitol Court NE #100</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Reimb for SMF PAC Dinner/phone/catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.9279</p> <p>Date of Disbursement 10 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 3312.95</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Steven H. Gordon &amp; Associates</p> <p>Mailing Address 507 Capitol Court NE #100</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement SMF PAC Fundraising Consultant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.9327</p> <p>Date of Disbursement 11 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Steven H. Gordon &amp; Associates</p> <p>Mailing Address 507 Capitol Court NE #100</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Reimb for SMF PAC Catering/telephone/Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.9328</p> <p>Date of Disbursement 11 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 4662.74</p>

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

11975.69

**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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates	Transaction ID: SB21B.9389 Date of Disbursement 12 / 30 / 2009
	Mailing Address 507 Capitol Court NE #100	Amount of Each Disbursement this Period 7673.83
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement REimb for SMF PAC Dinner/Catering/Shipping	
	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) ▼

B.	Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates	Transaction ID: SB21B.9390 Date of Disbursement 12 / 30 / 2009
	Mailing Address 507 Capitol Court NE #100	Amount of Each Disbursement this Period 4000.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement SMF PAC Fundraising Consultant Fees	
	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) ▼

C.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: SB21B.9082 Date of Disbursement 07 / 09 / 2009
	Mailing Address P.O. Box 7922	Amount of Each Disbursement this Period 825.30
	City San Francisco State CA Zip Code 94120-7922	
	Purpose of Disbursement Payroll Taxes	
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	12499.13
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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<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)  
Senate Majority Fund

<b>A.</b> Full Name (Last, First, Middle Initial) United States Treasury <hr/> Mailing Address P.O. Box 7922 <hr/> City San Francisco State CA Zip Code 94120-7922 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.9272 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 636.46
<b>B.</b> Full Name (Last, First, Middle Initial) US ONCOLOGY INC GOOD GOVERNMENT COMMITTEE <hr/> Mailing Address 16825 NORTHCHASE DRIVE SUITE 1300 <hr/> City HOUSTON State TX Zip Code 77060 <hr/> Purpose of Disbursement In-kind - Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.9461 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 650.00

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

1286.46

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

90255.03

**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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) <b>BENNETT ELECTION COMMITTEE INC</b>	<b>Transaction ID: SB23.9382</b>
	Mailing Address 175 SOUTH WEST TEMPLE SUITE 650	Date of Disbursement MM / DD / YYYY 12 / 27 / 2009
	City State Zip Code SALT LAKE CITY UT 84101	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name ROBERT F BENNETT	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: UT District: 00	

B.	Full Name (Last, First, Middle Initial) <b>CARLY FOR CALIFORNIA INC</b>	<b>Transaction ID: SB23.9177</b>
	Mailing Address 455 CAPITOL MALL SUITE 801	Date of Disbursement MM / DD / YYYY 08 / 20 / 2009
	City State Zip Code SACRAMENTO CA 95814	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name CARLY FIORINA	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: CA District: 00	

C.	Full Name (Last, First, Middle Initial) <b>CASTLE CAMPAIGN FUND</b>	<b>Transaction ID: SB23.9283</b>
	Mailing Address PO Box 133	Date of Disbursement MM / DD / YYYY 10 / 08 / 2009
	City State Zip Code Wilmington DE 19899	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name MICHAEL N CASTLE	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: DE District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>15000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) <b>CASTLE CAMPAIGN FUND</b>	Transaction ID: SB23.9286
	Mailing Address PO Box 133	Date of Disbursement 10 / 08 / 2009
	City Wilmington State DE Zip Code 19899	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	
	Candidate Name MICHAEL N CASTLE	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>CHARLIE CRIST FOR US SENATE</b>	Transaction ID: SB23.9101
	Mailing Address PO BOX 1694	Date of Disbursement 07 / 22 / 2009
	City TALLAHASSEE State FL Zip Code 32302	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	
	Candidate Name CHARLIE CRIST	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>CITIZENS FOR BUNNING</b>	Transaction ID: SB23.9089
	Mailing Address PO BOX 75167	Date of Disbursement 07 / 15 / 2009
	City FORT THOMAS State KY Zip Code 41075	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	
	Candidate Name JIM BUNNING	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
DAVID VITTER FOR U S SENATE

Mailing Address PO BOX 8175

City METAIRIE State LA Zip Code 70011

Purpose of Disbursement

Candidate Name  
DAVID VITTER

Office Sought:  House  
 Senate  
 President  
State: LA District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.9292  
Date of Disbursement

10 / 27 / 2009

Amount of Each Disbursement this Period

5000.00

Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF KELLY AYOTTE

Mailing Address PO BOX 233

City NASHUA State NH Zip Code 03061

Purpose of Disbursement

Candidate Name  
KELLY A AYOTTE

Office Sought:  House  
 Senate  
 President  
State: NH District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.9167  
Date of Disbursement

08 / 08 / 2009

Amount of Each Disbursement this Period

5000.00

Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF TREY GRAYSON

Mailing Address PO BOX 175726

City FT MITCHELL State KY Zip Code 41017

Purpose of Disbursement

Candidate Name  
C M TREY GRAYSON

Office Sought:  House  
 Senate  
 President  
State: KY District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.9170  
Date of Disbursement

08 / 08 / 2009

Amount of Each Disbursement this Period

5000.00

Category/  
Type

**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)

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

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

A.

Full Name (Last, First, Middle Initial)  
GEORGIANS FOR ISAKSON

Transaction ID: SB23.9287  
Date of Disbursement

Mailing Address 6000 LAKE FOREST DRIVE #102

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	9

City ATLANTA State GA Zip Code 30328

Amount of Each Disbursement this Period

Purpose of Disbursement

5000.00
---------

Candidate Name  
JOHN HARDY ISAKSON

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: GA District: 00

B.

Full Name (Last, First, Middle Initial)  
GRASSLEY COMMITTEE

Transaction ID: SB23.9379  
Date of Disbursement

Mailing Address PO BOX 1000

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

City DES MOINES State IA Zip Code 50304

Amount of Each Disbursement this Period

Purpose of Disbursement

5000.00
---------

Candidate Name  
CHARLES E SENATOR GRASSLEY

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IA District: 00

C.

Full Name (Last, First, Middle Initial)  
GRASSLEY COMMITTEE

Transaction ID: SB23.9380  
Date of Disbursement

Mailing Address PO BOX 1000

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

City DES MOINES State IA Zip Code 50304

Amount of Each Disbursement this Period

Purpose of Disbursement

5000.00
---------

Candidate Name  
CHARLES E SENATOR GRASSLEY

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IA District: 00

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

15000.00
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**TOTAL** This Period (last page this line number only) .....

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**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)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
JANE NORTON FOR COLORADO INC

Mailing Address 6400 S FIDDLERS GREEN CIRCLE  
ROOM 925

City GREENWOOD VILLAGE State CO Zip Code 80111

Purpose of Disbursement

Candidate Name  
JANE BERGMAN NORTON

Office Sought:  House  
 Senate  
 President

State: CO District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.9239

Date of Disbursement

09 / 22 / 2009

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
JANE NORTON FOR COLORADO INC

Mailing Address 6400 S FIDDLERS GREEN CIRCLE  
ROOM 925

City GREENWOOD VILLAGE State CO Zip Code 80111

Purpose of Disbursement

Candidate Name  
JANE BERGMAN NORTON

Office Sought:  House  
 Senate  
 President

State: CO District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.9383

Date of Disbursement

12 / 27 / 2009

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
KIRK FOR SENATE

Mailing Address P.O. Box 8

City Winnetka State IL Zip Code 60093

Purpose of Disbursement

Candidate Name  
MARK STEVEN KIRK

Office Sought:  House  
 Senate  
 President

State: IL District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.9242

Date of Disbursement

09 / 15 / 2009

Amount of Each Disbursement this Period

5000.00

**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 93 / 95

<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)  
Senate Majority Fund

A.	Full Name (Last, First, Middle Initial) <b>NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE</b>	<b>Transaction ID:</b> SB23.9290
	Mailing Address 320 FIRST STREET	Date of Disbursement 10 / 27 / 2009
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 15000.00
	Purpose of Disbursement	
	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) ▼

B.	Full Name (Last, First, Middle Initial) <b>PAT ROBERTS FOR SENATE</b>	<b>Transaction ID:</b> SB23.9097
	Mailing Address PO BOX 433	Date of Disbursement 07 / 22 / 2009
	City GREAT BEND State KS Zip Code 67530	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	
	Candidate Name PAT ROBERTS	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>PORTMAN FOR SENATE COMMITTEE</b>	<b>Transaction ID:</b> SB23.9381
	Mailing Address 8331 LITTLE HARBOR DRIVE	Date of Disbursement 12 / 27 / 2009
	City CINCINNATI State OH Zip Code 45244	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	
	Candidate Name ROB PORTMAN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>25000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Senate Majority Fund

**A.** Full Name (Last, First, Middle Initial)  
TOOMEY FOR SENATE COMMITTEE

Mailing Address 2720 JORDAN ROAD

City OREFIELD State PA Zip Code 18069

Purpose of Disbursement

Candidate Name  
PATRICK JOSEPH TOOMEY

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.9098

Date of Disbursement

07 / 22 / 2009

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
TOOMEY FOR SENATE COMMITTEE

Mailing Address 2720 JORDAN ROAD

City OREFIELD State PA Zip Code 18069

Purpose of Disbursement

Candidate Name  
PATRICK JOSEPH TOOMEY

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.9176

Date of Disbursement

08 / 19 / 2009

Amount of Each Disbursement this Period

5000.00

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

10000.00

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

11000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
Senate Majority Fund

**A.**

Full Name (Last, First, Middle Initial)  
Brownback For Governor

**Transaction ID:** SB29.9325

Date of Disbursement

Mailing Address PO Box 32025

<sup>M</sup> 1	<sup>M</sup> 1	/	<sup>D</sup> 1	<sup>D</sup> 0	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 9
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City Topeke State KS Zip Code 66604

Amount of Each Disbursement this Period

2000.00
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Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Friends of Rob Bell for Delegate

**Transaction ID:** SB29.9091

Date of Disbursement

Mailing Address 2309 Finch Court

<sup>M</sup> 0	<sup>M</sup> 7	/	<sup>D</sup> 1	<sup>D</sup> 5	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 9
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City Charlottesville State VA Zip Code 22911

Amount of Each Disbursement this Period

500.00
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Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

2500.00
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**TOTAL** This Period (last page this line number only) ..... ►

2500.00
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