



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Carolina Majority PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		939.44
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	1094.99									
(c) Total Receipts (from Line 19) .....	23000.00	76150.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	24094.99	77089.44								
7. Total Disbursements (from Line 31) .....	13553.71	66548.16								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10541.28	10541.28								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Carolina Majority PAC

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5500.00	47200.00
(i) Itemized (use Schedule A) .....	0.00	400.00
(ii) Unitemized .....	5500.00	47600.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	17500.00	28550.00
(c) Other Political Committees (such as PACs) .....	23000.00	76150.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	23000.00	76150.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	23000.00	76150.00

**DETAILED SUMMARY PAGE**  
of Disbursements

<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.....	3053.71	7548.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3053.71	7548.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	58500.00
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.....	500.00	500.00
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))..	13553.71	66548.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	13553.71	66548.16

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	23000.00	76150.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	23000.00	76150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3053.71	7548.16
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3053.71	7548.16

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
Carolina Majority PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Doyle McBride		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006
Mailing Address 512 Stucks Point Drive		Transaction ID: SA11A1-447-623-c Amount of Each Receipt this Period 2000.00
City State Zip Code Chapin SC 29036-8702		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer IAP Worldwide Services	Occupation Vice Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Paul Miller		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 6882 Ridge Water Court		Transaction ID: SA11A1-522-632-c Amount of Each Receipt this Period 500.00
City State Zip Code Centreville VA 20121-5709		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MillerWenholdCapitolStrat-egi	Occupation Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Joseph Fischer		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 1 Iroquois Drive		Transaction ID: SA11A1-563-635-c Amount of Each Receipt this Period 2000.00
City State Zip Code Freehold NJ 07728-7876		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Life Blood Medical	Occupation President	
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) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 15	
	(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)  
Carolina Majority PAC

**A.** Full Name (Last, First, Middle Initial)  
Wayne Valis

Mailing Address 3419 Washington Drive

City Falls Church State VA Zip Code 22041-2002

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

Name of Employer Valis & Associates Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2006

Transaction ID: SA11A1-564-636-c

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 15
	<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)  
Carolina Majority PAC

Full Name (Last, First, Middle Initial) <b>A. OUTBACK STEAKHOUSE INC POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2006
Mailing Address 2202 N West Shore Boulevard Floor 5		<b>Transaction ID: SA11C-263-615-c</b>
City Tampa      State FL      Zip Code 33607-5747	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00253153		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. NOPA-OFDA PAC</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2006
Mailing Address 301 N Fairfax Street		<b>Transaction ID: SA11C-547-614-c</b>
City Alexandria      State VA      Zip Code 22314-2635	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00379297		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. The Roche Good Government Committee</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006
Mailing Address 340 Kingsland Street		<b>Transaction ID: SA11C-554-624-c</b>
City Nutley      State NJ      Zip Code 07110-1150	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00072769		
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) ..... ▶	10500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 15
	(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)  
Carolina Majority PAC

**A.** Full Name (Last, First, Middle Initial)  
PH&S Federal PAC

Mailing Address 3000 Two Logan Square  
18th & Arch Streets

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00279927

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2006

Transaction ID: SA11C-561-634-c

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Protect Seniors PAC

Mailing Address 601 Pennsylvania Avenue NW  
Suite 900

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00426361

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 26 / 2006

Transaction ID: SA11C-566-638-c

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	17500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 15

<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)  
Carolina Majority PAC

Full Name (Last, First, Middle Initial) <b>A. National City Bank</b>		<b>Transaction ID:</b> SB21B-512-628-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO Box 856176		Amount of Each Disbursement this Period 307.70
City Louisville State KY Zip Code 40285-6176	Purpose of Disbursement Other: credit card bill Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. Concentric Office</b>		<b>Transaction ID:</b> SB21B-533-640-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO Box 2485		Amount of Each Disbursement this Period 828.41
City Springfield State VA Zip Code 22152-0485	Purpose of Disbursement AdminExpenses,postage,copies,phone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. Capitol Hill Club</b>		<b>Transaction ID:</b> SB21B-553-619-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 1917.60
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement CARPACFundraisingExpense:lunch Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3053.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 15

<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)  
Carolina Majority PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E Sky Harbor Boulevard

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement  
Travel: airfare

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-559-1-V

Date of Disbursement

09 / 29 / 2006

Amount of Each Disbursement this Period

307.70

**[MEMO ITEM]**

Subitemization of National City Bank

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

0.00

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

3053.71

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 15

<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)  
Carolina Majority PAC

Full Name (Last, First, Middle Initial) <b>A. Porter for Congress</b>		<b>Transaction ID:</b> SB23-IKEM110-631-I <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO Box 26087		Amount of Each Disbursement this Period 639.20
City Las Vegas State NV Zip Code 89126-0087	[MEMO ITEM] In-kind Donation Made	
Purpose of Disbursement Candidate Name Congressman Jon Porter Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03		011 Category/Type
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MUSGRAVE FOR CONGRESS</b>		<b>Transaction ID:</b> SB23-IKEM318-630-I <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 118 W Charlotte Street		Amount of Each Disbursement this Period 639.20
City Johnstown State CO Zip Code 80534-7806	[MEMO ITEM] In-kind Donation Made	
Purpose of Disbursement Candidate Name Congresswoman Marilyn Musgrave Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04		011 Category/Type
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Bouchard For U.S. Senate</b>		<b>Transaction ID:</b> SB23-488-627-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 4050 W Maple Road Suite 250		Amount of Each Disbursement this Period 1000.00
City Bloomfield State MI Zip Code 48301-3150	[MEMO ITEM] In-kind Donation Made	
Purpose of Disbursement Political Contribution: Candidate Name Michael Bouchard Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00		011 Category/Type
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 15

<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)  
Carolina Majority PAC

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF MIKE FERGUSON</b>		<b>Transaction ID:</b> SB23-283-626-e
Mailing Address c/o Ron Gravino P.O. Box 225		Date of Disbursement 09 / 29 / 2006
City Colonia	State NJ	Zip Code 07067
Purpose of Disbursement Political Contribution:		Amount of Each Disbursement this Period 2500.00
Candidate Name Mike Ferguson		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 07	

Full Name (Last, First, Middle Initial) <b>B. Huffman for Congress</b>		<b>Transaction ID:</b> SB23-548-616-e
Mailing Address 698 E Wetmore Road Suite 424		Date of Disbursement 09 / 12 / 2006
City Tucson	State AZ	Zip Code 85705-1753
Purpose of Disbursement Political Contribution:		Amount of Each Disbursement this Period 500.00
Candidate Name Steve Huffman		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 08	

Full Name (Last, First, Middle Initial) <b>C. Joy Padgett for Congress</b>		<b>Transaction ID:</b> SB23-550-617-e
Mailing Address 871 Walnut Street		Date of Disbursement 09 / 12 / 2006
City Coshocton	State OH	Zip Code 43812-1649
Purpose of Disbursement Political Contribution:		Amount of Each Disbursement this Period 1000.00
Candidate Name Joy Padgett		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 18	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4000.00</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)

<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

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)  
Carolina Majority PAC

Full Name (Last, First, Middle Initial) <b>A. Gard for Congress</b>		<b>Transaction ID:</b> SB23-556-625-e	
Mailing Address PO Box 277		Date of Disbursement 09 / 29 / 2006	
City Green Bay	State WI	Zip Code 54305-0277	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Political Contribution:		<input type="text" value="011"/> Category/ Type	
Candidate Name John Gard			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WI District: 08			

Full Name (Last, First, Middle Initial) <b>B. THELMA DRAKE FOR CONGRESS</b>		<b>Transaction ID:</b> SB23-IKEM319-629-I	
Mailing Address PO BOX 61480		Date of Disbursement 09 / 29 / 2006	
City VIRGINIA BEACH	State VA	Zip Code 23466	Amount of Each Disbursement this Period 639.20
Purpose of Disbursement		<input type="text" value="011"/> Category/ Type	
Candidate Name Thelma Drake			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: VA District: 02	[MEMO ITEM] In-kind Donation Made		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>10000.00</b>

**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 15 / 15

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

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NAME OF COMMITTEE (In Full)  
Carolina Majority PAC

Full Name (Last, First, Middle Initial)  
A. Committee To Elect Michael James

Mailing Address PO Box 3674

City Salisbury State MD Zip Code 21802-3674

Purpose of Disbursement  
nonfederal contribution

Candidate Name  
Michael James

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29-545-613-e  
Date of Disbursement

07 / 25 / 2006

Amount of Each Disbursement this Period

500.00

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

500.00

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

500.00