

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

The Commonwealth PAC

ADDRESS (number and street)

1 Thomas Circle NW, Suite 1100

☐Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00403022

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☒Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2007

through

11

21

2007

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

Type or Print Name of Treasurer

Elizabeth Anderson

Signature of Treasurer

Electronically Filed by Elizabeth Anderson

Date

11

21

2007

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

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
The Commonwealth PAC

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2007		187965.18
(b) Cash on Hand at Beginning of Reporting Period	29282.10	
(c) Total Receipts (from Line 19)	851.04	188856.59
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	30133.14	376821.77
7. Total Disbursements (from Line 31)	30133.14	376821.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	0.00
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
The Commonwealth PAC

Report Covering the Period:

From:

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

To:

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	108201.00
(i) Itemized (use Schedule A)	0.00	10683.00
(ii) Unitemized	0.00	118884.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	0.00	118884.00
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)	209.24	11109.24
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	641.80	57863.35
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))	851.04	188856.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	851.04	188856.59

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		26133.14	355821.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		26133.14	355821.77
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	0.00
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	17000.00
(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	17000.00
29. Other Disbursements.....		4000.00	4000.00
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))..		30133.14	376821.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		30133.14	376821.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	0.00	118884.00
34. Total Contribution Refunds (from Line 28(d))	0.00	17000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	101884.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26133.14	355821.77
37. Offsets to Operating Expenditures (from Line 15, page 3)	209.24	11109.24
38. Net Operating Expenditures (subtract Line 37 from Line 36)	25923.90	344712.53

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

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

FOR LINE NUMBER: PAGE 6 / 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Commonwealth PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 3 Center Plz

City

Boston

State

MA

Zip Code

02108-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interest Income

Occupation

Interest Income

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2985.45

Date of Receipt

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

Transaction ID: 100006809

Amount of Each Receipt this Period

157.16

Other Receipt

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 3 Center Plz

City

Boston

State

MA

Zip Code

02108-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interest Income

Occupation

Interest Income

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3112.44

Date of Receipt

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

Transaction ID: 100006810

Amount of Each Receipt this Period

126.99

Other Receipt

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 3 Center Plz

City

Boston

State

MA

Zip Code

02108-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interest Income

Occupation

Interest Income

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3347.05

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 100006811

Amount of Each Receipt this Period

234.61

Other Receipt

SUBTOTAL of Receipts This Page (optional)

518.76

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Commonwealth PAC

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

Bank of America

Mailing Address 3 Center Plz

City State Zip Code
 Boston MA 02108-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interest Income

Occupation
Interest Income

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3427.12

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 0 4 / 2 0 0 7

Transaction ID: 100006812

Amount of Each Receipt this Period

80.07

Other Receipt

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

Bank of America

Mailing Address 3 Center Plz

City State Zip Code
 Boston MA 02108-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interest Income

Occupation
Interest Income

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3470.09

Date of Receipt

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

Transaction ID: 100006813

Amount of Each Receipt this Period

42.97

Other Receipt

SUBTOTAL of Receipts This Page (optional)

123.04

TOTAL This Period (last page this line number only)

641.80

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)
The Commonwealth PAC

A. IRS Full Name (Last, First, Middle Initial) Mailing Address Internal Revenue Service Center City Ogden State UT Zip Code 84201-0027 Purpose of Disbursement INCOME TAX 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: 200009220 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 4106.61 INCOME TAX
B. IRS Full Name (Last, First, Middle Initial) Mailing Address Internal Revenue Service Center City Ogden State UT Zip Code 84201-0027 Purpose of Disbursement INCOME TAX 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: 200009211 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 1097.00 INCOME TAX
C. Nstar Full Name (Last, First, Middle Initial) Mailing Address PO Box 4508 City Woburn State MA Zip Code 01888-4508 Purpose of Disbursement VOIDED CHECK 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: 71121.E9332 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period -1022.78 VOIDED CHECK

SUBTOTAL of Disbursements This Page (optional)

4180.83

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)
The Commonwealth PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 3 Center Plz

City Boston State MA Zip Code 02108-2000

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200009203

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.95

BANK FEES

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 3 Center Plz

City Boston State MA Zip Code 02108-2000

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200009204

Date of Disbursement

/ /

Amount of Each Disbursement this Period

143.70

BANK FEES

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 3 Center Plz

City Boston State MA Zip Code 02108-2000

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200009205

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.95

BANK FEES

SUBTOTAL of Disbursements This Page (optional)

213.60

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)
The Commonwealth PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 3 Center Plz

City Boston State MA Zip Code 02108-2000

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200009206

Date of Disbursement

08 / 15 / 2007

Amount of Each Disbursement this Period

143.13

BANK FEES

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 3 Center Plz

City Boston State MA Zip Code 02108-2000

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200009207

Date of Disbursement

09 / 04 / 2007

Amount of Each Disbursement this Period

34.79

BANK FEES

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 3 Center Plz

City Boston State MA Zip Code 02108-2000

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200009208

Date of Disbursement

09 / 17 / 2007

Amount of Each Disbursement this Period

142.32

BANK FEES

SUBTOTAL of Disbursements This Page (optional)

320.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 18

<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)
The Commonwealth PAC

A. Patton Boggs Full Name (Last, First, Middle Initial) Mailing Address 2550 M St NW City Washington State DC Zip Code 20037-1301 Purpose of Disbursement PRO-RATED LEGAL 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: 71025.E9270 Date of Disbursement 10 / 25 / 2007 Amount of Each Disbursement this Period 3820.84 PRO-RATED LEGAL FEES
B. Nicholas Breeding Full Name (Last, First, Middle Initial) Mailing Address 900 Taylor St Apt. 212 City Columbia State SC Zip Code 29201- Purpose of Disbursement VOIDED CHECK 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: 71121.E9333 Date of Disbursement 09 / 20 / 2007 Amount of Each Disbursement this Period -1557.65 VOIDED CHECK
C. Peartrees Caterers Full Name (Last, First, Middle Initial) Mailing Address 2243 Verus St City San Diego State CA Zip Code 92154-4704 Purpose of Disbursement VOIDED CHECK 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: 71121.E9331 Date of Disbursement 09 / 20 / 2007 Amount of Each Disbursement this Period -1325.49 VOIDED CHECK

SUBTOTAL of Disbursements This Page (optional)

937.70

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 12 / 18

<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)
The Commonwealth PAC

Full Name (Last, First, Middle Initial)

A. Peartrees Caterers

Mailing Address 2243 Verus St

City San Diego State CA Zip Code 92154-4704

Purpose of Disbursement
VOIDED CHECK

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71121.E9330

Date of Disbursement

09 / 20 / 2007

Amount of Each Disbursement this Period

-662.75

VOIDED CHECK

Full Name (Last, First, Middle Initial)

B. Massachusetts Department of Revenue

Mailing Address PO Box 7065

City Boston State MA Zip Code 02204-7065

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200009190

Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

33.88

TAXES

Full Name (Last, First, Middle Initial)

C. Massachusetts Department of Revenue

Mailing Address PO Box 7065

City Boston State MA Zip Code 02204-7065

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200009191

Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

2577.17

TAXES

SUBTOTAL of Disbursements This Page (optional)

1948.30

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 13 / 18

<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)
The Commonwealth PAC

Full Name (Last, First, Middle Initial)

A. Massachusetts Department of Revenue

Mailing Address PO Box 7065

City Boston State MA Zip Code 02204-7065

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200009202

Date of Disbursement

09 / 25 / 2007

Amount of Each Disbursement this Period

127.81

TAXES

Full Name (Last, First, Middle Initial)

B. Paul DiMaggio

Mailing Address 325 Highland Lane

City Bryn Mawr State PA Zip Code 19010-

Purpose of Disbursement
VOIDED CHECK

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71121.E9334

Date of Disbursement

09 / 20 / 2007

Amount of Each Disbursement this Period

-340.55

VOIDED CHECK

Full Name (Last, First, Middle Initial)

C. Paul DiMaggio

Mailing Address 325 Highland Lane

City Bryn Mawr State PA Zip Code 19010-

Purpose of Disbursement
VOIDED CHECK

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71121.E9335

Date of Disbursement

09 / 20 / 2007

Amount of Each Disbursement this Period

-340.55

VOIDED CHECK

SUBTOTAL of Disbursements This Page (optional)

-553.29

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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)
The Commonwealth PAC

Full Name (Last, First, Middle Initial)

A. Caplin & Drysdale

Mailing Address One Thomas Cir. NW, Suite 1100

City Washington State DC Zip Code 20005-

Purpose of Disbursement
PRO-RATED LEGAL FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200009186

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4764.63

PRO-RATED LEGAL FEES

Full Name (Last, First, Middle Initial)

B. Caplin & Drysdale

Mailing Address One Thomas Cir. NW, Suite 1100

City Washington State DC Zip Code 20005-

Purpose of Disbursement
PRO-RATED LEGAL FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200009185

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5025.08

PRO-RATED LEGAL FEES

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
CREDIT CARD PMT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200009180

Date of Disbursement

/ /

Amount of Each Disbursement this Period

817.00

CREDIT CARD PMT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

10606.71

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)
The Commonwealth PAC

A. Full Name (Last, First, Middle Initial) ENilsson, LLC		Transaction ID: 200009179 Date of Disbursement <div> <div>09</div> <div>04</div> <div>2007</div> </div>	
Mailing Address 6 Depot St		Amount of Each Disbursement this Period <div>50.00</div>	
City Westford State MA Zip Code 01886-2608			
Purpose of Disbursement WEBSITE SERVICES	<div>Category/Type</div>		
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) ▼	WEBSITE SERVICES	
B. Full Name (Last, First, Middle Initial) ENilsson, LLC		Transaction ID: 200009178 Date of Disbursement <div> <div>09</div> <div>18</div> <div>2007</div> </div>	
Mailing Address 6 Depot St		Amount of Each Disbursement this Period <div>50.00</div>	
City Westford State MA Zip Code 01886-2608			
Purpose of Disbursement WEBSITE SERVICES			<div>Category/Type</div>
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) Commonwealth of Massachusetts		Transaction ID: 200009189 Date of Disbursement <div> <div>07</div> <div>23</div> <div>2007</div> </div>	
Mailing Address Executive Department State House		Amount of Each Disbursement this Period <div>1680.19</div>	
City Boston State MA Zip Code 02133-			
Purpose of Disbursement PRO-RATED RENTAL CARS FOR 2006			<div>Category/Type</div>
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) ▼	
PRO-RATED RENTAL CARS FOR 2006			

SUBTOTAL of Disbursements This Page (optional)

1780.19

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)
The Commonwealth PAC

A. Papercraft Full Name (Last, First, Middle Initial) Mailing Address 9677-C Main Street City Fairfax State VA Zip Code 22031-3743 Purpose of Disbursement PRO-RATED OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 200009187 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>314.57</td> </tr> </table> PRO-RATED OFFICE SUPPLIES	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	4		2	0	0	7	314.57
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	4		2	0	0	7														
314.57																							
B. Enterprise Rent-A-Car Full Name (Last, First, Middle Initial) Mailing Address 248 Mishawum Rd City Woburn State MA Zip Code 01801- Purpose of Disbursement PRO-RATED RENTAL CARS FOR 2006 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: 200009188 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>6657.05</td> </tr> </table> PRO-RATED RENTAL CARS FOR 2006	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	3		2	0	0	7	6657.05
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	3		2	0	0	7														
6657.05																							

SUBTOTAL of Disbursements This Page (optional)

6971.62

TOTAL This Period (last page this line number only)

26405.90

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

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NAME OF COMMITTEE (In Full)
The Commonwealth PAC

Full Name (Last, First, Middle Initial)

A. Ascend Humanitarian Allianc

Mailing Address 3165 East Millrock Dr. STE 175

City Salt Lake City State UT Zip Code 84121-

Purpose of Disbursement
CHARITABLE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Other

Transaction ID: 200009177

Date of Disbursement

09 / 20 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. American Red Cross

Mailing Address PO Box 4002018

City Des Moines State IA Zip Code 50340-2018

Purpose of Disbursement
CHARITABLE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Other

Transaction ID: 200009175

Date of Disbursement

09 / 20 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Greenbrier County Republican Committee

Mailing Address PO Box 777

City White Sulphur Spgs State WV Zip Code 24986-

Purpose of Disbursement
VOIDED CHECK

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Other

Transaction ID: 71121.E9338

Date of Disbursement

09 / 20 / 2007

Amount of Each Disbursement this Period

-1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

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 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)

The Commonwealth PAC

Full Name (Last, First, Middle Initial)

A. Diabetes Action Research & Education

Mailing Address 426 C Street, NE

City
Washington

State
DC

Zip Code
20002-

Purpose of Disbursement
CHARITABLE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Other

Transaction ID: 200009176

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

4000.00