

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
Alliance For The West

ADDRESS (number and street) P.O. Box 26366
 Check if different than previously reported. (ACC)
Alexandria VA 22313

2. **FEC IDENTIFICATION NUMBER** C00335133
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 06 01 2006 through 06 30 2006

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 William D. Harris

Signature of Treasurer Electronically Filed by William D. Harris Date 07 20 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Alliance For The West

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 6 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| 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 | | 14463.44 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 6 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 10142.04 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 23365.48 | 66865.48 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 33507.52 | 81328.92 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 16814.65 | 64636.05 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 16692.87 | 16692.87 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Alliance For The West

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 6 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| 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 | 5865.48 | 23365.48 |
| (i) Itemized (use Schedule A) | 0.00 | 0.00 |
| (ii) Unitemized | | |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 5865.48 | 23365.48 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 17500.00 | 43500.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 23365.48 | 66865.48 |
| 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)) | 23365.48 | 66865.48 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 23365.48 | 66865.48 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 6814.65 | 23136.05 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 6814.65 | 23136.05 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 10000.00 | 15000.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 26500.00 |
| 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)).. | 16814.65 | 64636.05 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 16814.65 | 64636.05 |

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) | 23365.48 | 66865.48 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 23365.48 | 66865.48 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 6814.65 | 23136.05 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 6814.65 | 23136.05 |

**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 / 11 |
| | <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)
Alliance For The West

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Suzie Brewster | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 409 South Capitol Street SW Suite 608-A | | Transaction ID: SA11A1.5021 |
| City State Zip Code Washington DC 20003 | Amount of Each Receipt this Period 365.48 | |
| FEC ID number of contributing federal political committee. C | In-kind - printing | |
| Name of Employer: Suzie Brewster & Associates Occupation: Owner | Aggregate Year-to-Date ▼ 615.48 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Spokane Tribe of Indians | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6 |
| Mailing Address P O Box 100 | | Transaction ID: SA11A1.5023 |
| City State Zip Code Wellpint WA 99040 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 500.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. John Stone | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 104 South Division Street | | Transaction ID: SA11A1.5025 |
| City State Zip Code Spokane WA 99202 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer: SRM Occupation: Developer | Aggregate Year-to-Date ▼ 5000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 5865.48 |
| TOTAL This Period (last page this line number only) ▶ | 5865.48 |

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

| | |
|--|--|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 / 11 |
| | (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)
Alliance For The West

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2006 |
| Mailing Address 1201 L Street NW | | Transaction ID: SA11C.5026 |
| City Washington | State DC | Zip Code 20005 |
| FEC ID number of contributing federal political committee. C C00006080 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. ANHEUSER-BUSCH COMPANIES INC POLITICAL ACTION COMMITTEE (AB-PAC) | | Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 |
| Mailing Address ONE BUSCH PLACE | | Transaction ID: SA11C.5029 |
| City ST. LOUIS | State MO | Zip Code 63118 |
| FEC ID number of contributing federal political committee. C C00034488 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

| | | |
|--|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. FEDERAL NATIONAL MORTGAGE ASSOCIATION POLITICAL ACTION COMMITTEE AKA FANNIE MAE PAC | | Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 |
| Mailing Address 3900 Wisconsin Avenue NW | | Transaction ID: SA11C.5028 |
| City Washington | State DC | Zip Code 20016 |
| FEC ID number of contributing federal political committee. C C00393520 | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | |

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 8 / 11 |
| | (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) Alliance For The West |
|--|

| | |
|---|-------------------------------------|
| Full Name (Last, First, Middle Initial) A. SENIORS HOUSING POLITICAL ACTION COMMITTEE | |
| Mailing Address 5100 WISCONSIN AVENUE NW #307 | |
| City WASHINGTON | State DC |
| Zip Code 20016 | |
| FEC ID number of contributing federal political committee. | C C00325332 |
| 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 |

| |
|---|
| Date of Receipt MM / DD / YYYY 06 / 30 / 2006 |
| Transaction ID: SA11C.5027 |
| Amount of Each Receipt this Period 5000.00 |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 5000.00 |
| TOTAL 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Alliance For The West

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. 116 CLUB | | Transaction ID: SB21B.5031 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 234 THIRD STREET, NE | | Amount of Each Disbursement this Period 523.80 |
| City WASHINGTON State DC Zip Code 20002 | Purpose of Disbursement Catering | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Suzie Brewster | | Transaction ID: SB21B.5022 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 409 South Capitol Street SW Suite 608-A | | Amount of Each Disbursement this Period 365.48 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement In-kind - printing | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Prince Georges County Trap & Skeet | | Transaction ID: SB21B.5032 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 10400 Good Luck Rd. | | Amount of Each Disbursement this Period 1102.45 |
| City Glenn Dale State MD Zip Code 20769 | Purpose of Disbursement Fundraising event | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1991.73 |
| 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 10 / 11

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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)
Alliance For The West

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. The Townsend Group | | Transaction ID: SB21B.5033 | |
| Mailing Address 429 N. St. Asaph Street | | Date of Disbursement 06 / 30 / 2006 | |
| City Alexandria | State VA | Zip Code 22314 | Amount of Each Disbursement this Period 4817.92 |
| Purpose of Disbursement Generic fundraising consultant | | Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 4817.92 |
| TOTAL This Period (last page this line number only) | 6809.65 |

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)
Alliance For The West

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. FRIENDS OF CONRAD BURNS - 2006 | | Transaction ID: SB23.5035 | |
| Mailing Address PO BOX 1596 | | Date of Disbursement 06 / 28 / 2006 | |
| City HELENA | State MT | Zip Code 59624 | Amount of Each Disbursement this Period 5000.00 |
| Purpose of Disbursement | | Category/Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" 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: MT | District: | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. NEBRASKA FAMILIES FOR PETE RICKETTS INC | | Transaction ID: SB23.5036 | |
| Mailing Address 11225 DAVENPORT ST STE 108 | | Date of Disbursement 06 / 28 / 2006 | |
| City OMAHA | State NE | Zip Code 68154 | Amount of Each Disbursement this Period 5000.00 |
| Purpose of Disbursement | | Category/Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" 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: NE | District: 00 | | |

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