| FEC<br>FORM 3X                                                                                                                                                            | A                                                                                                    | ND DIS                    | BURSE                                          | ECEIPTS<br>EMENTS<br>prized Comm                           | S                    |          | Office Use Only                                            |                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------|------------------------------------------------------------|----------------------|----------|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| 1. NAME OF<br>COMMITTEE (in fu                                                                                                                                            |                                                                                                      | E FEC MAILI<br>TYPE OR PI | -                                              | Example:If ty over the lines                               |                      |          |                                                            |                                                                                                                                            |
| Help America's Lea                                                                                                                                                        |                                                                                                      |                           |                                                |                                                            |                      |          |                                                            |                                                                                                                                            |
| ADDRESS (number and                                                                                                                                                       | street)                                                                                              | 1155 21st Str             |                                                |                                                            |                      |          |                                                            |                                                                                                                                            |
| Check if differ<br>than previously<br>reported. (ACC                                                                                                                      | ent L                                                                                                | Washington                |                                                |                                                            |                      |          | 20036                                                      |                                                                                                                                            |
| 2. FEC IDENTIFICAT                                                                                                                                                        | ION NUMBER                                                                                           | R ¥                       | CITY                                           | A                                                          | :                    | STATE 🛋  | ZIPCODE                                                    |                                                                                                                                            |
| C00376038                                                                                                                                                                 |                                                                                                      |                           |                                                | PORT X                                                     | NEW<br>(N) <b>OR</b> | AN<br>(A | MENDED                                                     |                                                                                                                                            |
| July 15<br>Quarterly<br>October<br>Quarterly<br>January 3<br>Quarterly<br>July 31 M<br>Report(N<br>Year Only                                                              | orts:<br>Report(Q1)<br>Report(Q2)<br>15<br>Report(Q3)<br>31<br>Report(YE)<br>lid-Year<br>on-election | (d) 30-1                  | Day<br>E-Election<br>bort for the:<br>Election | 0 (M3)<br>0 (M4)<br>Primary (<br>Conventi<br>on<br>General | on (12C)             | Sep      | 20 (M9)<br>20 (M10)<br>(12G)<br>12G)<br>in the<br>State of | Nov 20 (M11)<br>(Non-Election<br>Vear Only)<br>Dec 20 (M12)<br>(Non-Election<br>Year Only)<br>Jan 31 (YE)<br>Runoff (12R)<br>Special (30S) |
| 5. Covering Period                                                                                                                                                        | 07                                                                                                   | 0 1                       | 2006                                           | throug                                                     |                      | 31       | 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 Clay Parker Davis |                                                                                                      |                           |                                                |                                                            |                      |          |                                                            |                                                                                                                                            |
| Signature of Treasurer                                                                                                                                                    |                                                                                                      |                           |                                                |                                                            |                      |          |                                                            |                                                                                                                                            |
| Office<br>Use<br>Only                                                                                                                                                     |                                                                                                      |                           |                                                |                                                            |                      |          | FEC FORM<br>(Rev. 02/2003                                  | 1 3X                                                                                                                                       |

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

| ۷   |       | or Type Committee Na<br>Ip America's Leade                                  |                                             | tion Com  | mittee (H/                            | ALPAC)                  |     |       |                              |                 |
|-----|-------|-----------------------------------------------------------------------------|---------------------------------------------|-----------|---------------------------------------|-------------------------|-----|-------|------------------------------|-----------------|
| F   | Repor | t Covering the Period:                                                      | From:                                       | м м<br>07 | 0 <sup>D</sup> 01                     | <sup>Y</sup> 2006       | To: | 0 7   | <sup>D</sup> <sup>D</sup> 31 | Y Y Y Y<br>2006 |
|     |       |                                                                             |                                             |           |                                       | COLUMN A<br>This Period |     | Caler | COLUMN<br>ndar Year-to       |                 |
| 6.  | (a)   | Cash on Hand<br>January 1                                                   | <sup>°</sup> 2006 <sup>°</sup> <sup>°</sup> | ]         |                                       |                         |     |       | 52                           | 24777.16        |
|     | (b)   | Cash on Hand at<br>Begining of Reporting                                    | Period                                      |           |                                       | 377390.91               |     |       |                              |                 |
|     | (c)   | Total Receipts (from                                                        | Line 19)                                    |           |                                       | 40667.69                |     |       | 17                           | 78834.89        |
|     | (d)   | Subtotal (add lines 6(                                                      | b) and                                      |           |                                       |                         |     |       |                              |                 |
|     |       | 6(c) for Column A and 6(c) for Colu                                         |                                             |           | • • •                                 | 418058.60               |     | • • • | 70                           | 03612.05        |
| 7.  | Tota  | al Disbursements (from                                                      | 1 Line 31)                                  |           | • • •                                 | 28694.60                |     |       | 31                           | 4248.05         |
| 8.  | Rep   | sh on Hand at Close of<br>porting Period<br>ptract Line 7 from Line         | 6(d))                                       |           |                                       | 389364.00               |     |       | 38                           | 39364.00        |
| 9.  | the   | ots and Obligations owe<br>committee (Itemize all<br>redule C and/or Schedu | on                                          |           |                                       | .00                     |     |       |                              |                 |
| 10. | the   | ots and Obligations owe<br>committee (Itemize all<br>nedule C and/or Schedu | on                                          |           | · · · · · · · · · · · · · · · · · · · | .00                     |     |       |                              |                 |

X 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

(c)

DETAILED SUMMARY PAGE OF RECEIPTS FEC Form 3X (Rev. 02/2003) Page 3 Write or Type Committee Name Help America's Leaders Political Action Committee (HALPAC) 0<sup>D</sup>1 3<sup>D</sup>1 <sup>м</sup> М 07 D <sup>м</sup> м 07 2006 D 2006 Report Covering the Period: From: To: **COLUMN A** COLUMN B I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 7500.00 72500.00 (i) Itemized (use Schedule A) ..... .00 .00 (ii) Unitemized ..... (iii) TOTAL (add 7500.00 72500.00 Lines 11(a)(i) and (ii) ..... .00 .00 (b) Political Party Committees ..... Other Political Committees 29000.00 101000.00 (such as PACs) .....

36500.00

.00

.00

.00

.00

4000.00

167.69

.00

.00

.00

40667.69

40667.69

- Total Contributions (add Lines (d)
- 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....

Party Committees ..... 13. All Loans Received .....

12. Transfers From Affiliated/Other

- 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)
- (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....
- 17. Other Federal Receipts (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account
  - (from Schedule H3) .....
  - (b) Levin Funds (from Schedule H5) ......
  - (c) Total Transfer (add 18(a) and 18(b)).
- 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....
- 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....

- - 173500.00
- .00 .00 .00
  - .00
  - 4000.00 1334.89
- .00 .00 .00
  - 178834.89
    - 178834.89

## **DETAILED SUMMARY PAGE**

|    | FEC Form 3X (Rev. 02/2003)                                                               | of Disbursements              | Page 4                            |
|----|------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
|    | II. DISBURSEMENTS                                                                        | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
| 1. | Operating Expenditures:<br>(a) Shared Federal/Non-Federal<br>Activity (from Schedule H4) | .00                           | .00                               |
|    | (i) Federal Share                                                                        |                               |                                   |
|    | (ii) Non-Federal Share                                                                   | .00                           | .00                               |
|    | (b) Other Federal Operating<br>Expenditures                                              | 4194.60                       | 99748.05                          |
|    | (c) Total Operating Expenditures<br>(add 21(a)(i), (a)(ii) and (b)) ▶                    | 4194.60                       | 99748.05                          |
| 2. | Transfers to Affiliated/Other Party                                                      |                               |                                   |
| 3. | Committees<br>Contributions to                                                           | .00                           | .00                               |
|    | Federal Candidates/Committeesand Other Political Committees                              | 24500.00                      | 187000.00                         |
| 4. | Independent Expenditure<br>(use Schedule E)                                              | .00                           | .00                               |
| 5. | Coordinated Expenditures Made by Party<br>Committees (2 U.S.C. 441a(d))                  | .00                           | .00                               |
|    | (use Schedule F)                                                                         |                               |                                   |
| 6. | Loan Repayments Made                                                                     | .00                           | .00                               |
|    | Loans Made                                                                               | .00                           | .00                               |
| 8. | Refunds of Contributions To:<br>(a) Individuals/Persons Other                            | .00                           | .00                               |
|    | Than Political Committees                                                                |                               |                                   |
|    | <ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>  | .00                           | .00                               |
|    | (such as PACs)                                                                           | .00                           | .00                               |
|    | (d) Total Contribution Refunds<br>(add Lines 28(a), (b), and (c)) >                      | .00                           | .00                               |
|    |                                                                                          |                               |                                   |
| 9. | Other Disbursements                                                                      | .00                           | 27500.00                          |
| 0. | Federal Election Activity (2 U.S.C 431(20))                                              |                               |                                   |
|    | (a) Shared Federal Election Activity<br>(from Schedule H6)                               | 0.00                          |                                   |
|    | (i) Federal Share                                                                        | 0.00                          | 0.00                              |
|    | (ii) "Levin" Share                                                                       | 0.00                          | 0.00                              |
|    | (b) Federal Election Activity Paid Entirely<br>With Federal Funds                        | 0.00                          | 0.00                              |
|    | (c) Total Federal Election Activity (add                                                 | 0.00                          | 0.00                              |
|    | Lines 30(a)(i), 30(a)(ii) and 30(b))                                                     |                               |                                   |
| 1. | Total Disbursements (add Lines 21(c), 22,                                                | 00001.00                      |                                   |
|    | 23, 24, 25, 26, 27, 28(d), 29 and 30(c))                                                 | 28694.60                      | 314248.05                         |
| 2. | Total Federal Disbursements                                                              |                               |                                   |
|    | (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)                               | 28694.60                      | 314248.05                         |
|    |                                                                                          | 20034.00                      | 014240.00                         |

# DETAILED SUMMARY PAGE

| -   | FEC Form 3X (Rev. 02/2003)                                              | of Disbursements              | Page 5                            |
|-----|-------------------------------------------------------------------------|-------------------------------|-----------------------------------|
|     | III. Net Contributions/Operating<br>Expenditures                        | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
| 33. | Total Contributions (other than loans) from Line 11(d), page 3)         | 36500.00                      | 173500.00                         |
| 34. | Total Contribution Refunds<br>(from Line 28(d))                         | .00                           | .00                               |
| 35. | Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) | 36500.00                      | 173500.00                         |
| 36. | Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 4194.60                       | 99748.05                          |
| 37. | Offsets to Operating Expenditures (from Line 15, page 3)                | .00                           | .00                               |
| 38. | Net Operating Expenditures (subtract Line 37 from Line 36)              | 4194.60                       | 99748.05                          |

| SCHEDULE A (FEC Form 3X)                    |                                                                                                                                   |                         | Use separate schedule(s)                                                  | FOR LINE NUMBER: PAGE 6 / 23<br>(check only one)                                         |  |  |  |  |  |  |
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--|--|--|--|--|--|
| IT                                          | EMIZED RECEIPTS                                                                                                                   |                         | or each category of the                                                   | $\overline{X}$ 11a 11b 11c 12                                                            |  |  |  |  |  |  |
|                                             |                                                                                                                                   |                         | Detailed Summary Page                                                     |                                                                                          |  |  |  |  |  |  |
| Ar<br>or                                    | y information copied from such Reports and Sta<br>for commercial purposes, other than using the n                                 | tements may ame and add | y not be sold or used by any perso<br>dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |  |  |  |
| $\sum$                                      | NAME OF COMMITTEE (In Full)                                                                                                       |                         |                                                                           |                                                                                          |  |  |  |  |  |  |
| $\mathbb{Z}$                                | Help America's Leaders Political Action                                                                                           | Committee               | e (HALPAC)                                                                |                                                                                          |  |  |  |  |  |  |
| Α.                                          | Full Name (Last, First, Middle Initial)<br>Jill S. Bockorny                                                                       |                         |                                                                           | Date of Receipt                                                                          |  |  |  |  |  |  |
|                                             | Mailing Address 3101 S. Bishop Jones P                                                                                            |                         |                                                                           | 07 / D D / Y Y Y Y<br>14 2006                                                            |  |  |  |  |  |  |
|                                             | City                                                                                                                              | State                   | Zip Code                                                                  | Transaction ID: 1152897035838                                                            |  |  |  |  |  |  |
|                                             | Sioux Falls                                                                                                                       | SD                      | 57103                                                                     | Amount of Each Receipt this Period                                                       |  |  |  |  |  |  |
|                                             | FEC ID number of contributing federal political committee.                                                                        | C                       |                                                                           | 250.00                                                                                   |  |  |  |  |  |  |
|                                             | Name of Employer<br>Homemaker                                                                                                     | Occupation<br>Homema    |                                                                           | - Check                                                                                  |  |  |  |  |  |  |
|                                             | Receipt For:                                                                                                                      | Aggregate               | Year-to-Date ▼                                                            |                                                                                          |  |  |  |  |  |  |
|                                             | Primary General                                                                                                                   |                         | 250.00                                                                    | 1                                                                                        |  |  |  |  |  |  |
|                                             | Other (specify) <b>v</b>                                                                                                          | 0 0                     |                                                                           |                                                                                          |  |  |  |  |  |  |
| В.                                          | Full Name (Last, First, Middle Initial)<br>Bill K. Brewster                                                                       |                         |                                                                           | Date of Receipt                                                                          |  |  |  |  |  |  |
|                                             | Mailing Address PO Box 459                                                                                                        |                         |                                                                           | 07 / 14 / Y Y Y Y<br>006                                                                 |  |  |  |  |  |  |
|                                             | City                                                                                                                              | State                   | Zip Code                                                                  | Transaction ID: 1152897946196                                                            |  |  |  |  |  |  |
|                                             | Batesville                                                                                                                        | TX                      | 78829                                                                     | Amount of Each Receipt this Period                                                       |  |  |  |  |  |  |
|                                             | FEC ID number of contributing federal political committee.                                                                        | C                       |                                                                           | 500.00                                                                                   |  |  |  |  |  |  |
|                                             | Name of Employer<br>Capitol Hill Consulting<br>Group                                                                              | Occupation<br>Consulta  |                                                                           | - Check                                                                                  |  |  |  |  |  |  |
|                                             | Receipt For:                                                                                                                      | Aggregate               | Year-to-Date V                                                            | -                                                                                        |  |  |  |  |  |  |
|                                             | Primary   General     Other (specify) ▼                                                                                           | 0 0                     | 500.00                                                                    | ]                                                                                        |  |  |  |  |  |  |
|                                             | Full Name (Last, First, Middle Initial)<br>Christopher C. Cox                                                                     |                         |                                                                           | Date of Receipt                                                                          |  |  |  |  |  |  |
|                                             | Mailing Address 3106 Russell Road                                                                                                 |                         |                                                                           | 07 14 2006                                                                               |  |  |  |  |  |  |
|                                             | City                                                                                                                              | State                   | Zip Code                                                                  | Transaction ID: 1152897698560                                                            |  |  |  |  |  |  |
|                                             | Alexandria                                                                                                                        | VA                      | 22305                                                                     | Amount of Each Receipt this Period                                                       |  |  |  |  |  |  |
|                                             | FEC ID number of contributing<br>federal political committee.CName of Employer<br>DC NavigatorsOccupa<br>LobbyiReceipt For:Aggreg |                         |                                                                           | 1000.00                                                                                  |  |  |  |  |  |  |
|                                             |                                                                                                                                   |                         | 1                                                                         | - Check                                                                                  |  |  |  |  |  |  |
|                                             |                                                                                                                                   |                         | Year-to-Date 🔻                                                            | 1                                                                                        |  |  |  |  |  |  |
| Primary     General       Other (specify) ▼ |                                                                                                                                   |                         | 1000.00                                                                   |                                                                                          |  |  |  |  |  |  |
| s                                           | SUBTOTAL of Receipts This Page (optional)                                                                                         |                         |                                                                           |                                                                                          |  |  |  |  |  |  |
| Т                                           | TOTAL This Period (last page this line number only)                                                                               |                         |                                                                           |                                                                                          |  |  |  |  |  |  |

| S                     | CHEDULE A (FEC Form 3X)                                                |                         | Use separate schedule(s)                         | FOR LINE NUMBER: PAGE 7 / 23<br>(check only one)                  |  |  |  |
|-----------------------|------------------------------------------------------------------------|-------------------------|--------------------------------------------------|-------------------------------------------------------------------|--|--|--|
| ITEMIZED RECEIPTS     |                                                                        |                         | or each category of the<br>Detailed Summary Page | X 11a 11b 11c 12                                                  |  |  |  |
| Ar                    | y information copied from such Reports and Sta                         | atements may            | y not be sold or used by any perso               | 13 14 15 16 17                                                    |  |  |  |
| or                    | for commercial purposes, other than using the r                        | name and add            | dress of any political committee to              | o solicit contributions from such committee.                      |  |  |  |
| $\left \right\rangle$ | NAME OF COMMITTEE (In Full)<br>Help America's Leaders Political Action | Committee               |                                                  |                                                                   |  |  |  |
| $\angle$              | Theip America's Leaders Follical Action                                | Committee               |                                                  |                                                                   |  |  |  |
| Α.                    | Full Name (Last, First, Middle Initial)<br>George David                |                         |                                                  | Date of Receipt                                                   |  |  |  |
|                       | Mailing Address 605 Deefcliff Road                                     |                         |                                                  | M M / D D / Y Y Y Y                                               |  |  |  |
|                       | City                                                                   | State                   | Zip Code                                         | 07312006<br>Transaction ID: 1154621949455                         |  |  |  |
|                       | Avon                                                                   | СТ                      | 06001                                            | Amount of Each Receipt this Period                                |  |  |  |
|                       | FEC ID number of contributing                                          | С                       |                                                  | 1000.00                                                           |  |  |  |
|                       | federal political committee.                                           |                         |                                                  |                                                                   |  |  |  |
|                       | Name of Employer<br>United Technologies                                | Occupation<br>Executive |                                                  |                                                                   |  |  |  |
|                       | Receipt For: 006"                                                      |                         | Year-to-Date ▼                                   |                                                                   |  |  |  |
|                       | Primary General                                                        | 1 1                     | 1000.00                                          | 1                                                                 |  |  |  |
|                       | Other (specify)                                                        | 0 0                     |                                                  | 1                                                                 |  |  |  |
|                       | Full Name (Last, First, Middle Initial)<br>Mark R. Disler              |                         |                                                  | Data of Respirit                                                  |  |  |  |
| р.                    | Mailing Address 240 Congressional Lane                                 | Э                       |                                                  | Date of Receipt                                                   |  |  |  |
|                       |                                                                        |                         | 7.0.1                                            | 07 14 2006                                                        |  |  |  |
|                       | City<br>Rockville                                                      | State<br>MD             | Zip Code<br>20852                                | Transaction ID: 1152897849057 Amount of Each Receipt this Period  |  |  |  |
|                       | FEC ID number of contributing                                          |                         | 20032                                            |                                                                   |  |  |  |
|                       | federal political committee.                                           | С                       |                                                  | 500.00                                                            |  |  |  |
|                       | Name of Employer<br>BKSH & Associates                                  | Occupation              | 1                                                | Check                                                             |  |  |  |
|                       |                                                                        | Consulta                |                                                  |                                                                   |  |  |  |
|                       | Receipt For:<br>Primary General                                        | Aggregate               | e Year-to-Date 🔻                                 | -                                                                 |  |  |  |
|                       | Other (specify) ▼                                                      |                         | 500.00                                           |                                                                   |  |  |  |
|                       |                                                                        |                         |                                                  |                                                                   |  |  |  |
| C.                    | Full Name (Last, First, Middle Initial)<br>Robert J. Dotchin           |                         |                                                  | Date of Receipt                                                   |  |  |  |
|                       | Mailing Address 412 North St                                           |                         |                                                  | 07 14 Y Y Y Y<br>066 14 14 10 10 10 10 10 10 10 10 10 10 10 10 10 |  |  |  |
|                       | Asaph St<br>City                                                       | State                   | Zip Code                                         | Transaction ID: 1152898279283                                     |  |  |  |
|                       | Alexandria                                                             | VA                      | 22314                                            | Amount of Each Receipt this Period                                |  |  |  |
|                       | FEC ID number of contributing federal political committee.             | С                       |                                                  | 500.00                                                            |  |  |  |
|                       | ·                                                                      |                         |                                                  | Check                                                             |  |  |  |
|                       | Name of Employer<br>The Advocacy Group                                 | Occupation<br>Consulta  |                                                  |                                                                   |  |  |  |
|                       | Receipt For:                                                           |                         | e Year-to-Date V                                 |                                                                   |  |  |  |
|                       | Cher (specify) ▼                                                       |                         | 500.00                                           | 1                                                                 |  |  |  |
|                       |                                                                        | 0.0                     | <u> </u>                                         | J                                                                 |  |  |  |
|                       |                                                                        |                         |                                                  | 2000.00                                                           |  |  |  |
| s                     | <b>UBTOTAL</b> of Receipts This Page (optional)                        |                         |                                                  |                                                                   |  |  |  |
| т                     | OTAL This Period (last page this line number o                         | nly)                    |                                                  |                                                                   |  |  |  |

|           | CHEDULE A (FEC Form 3X)<br>EMIZED RECEIPTS                                                        |                            | Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:         PAGE 8 / 23           (check only one)                           |  |  |  |
|-----------|---------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|--|--|--|
|           |                                                                                                   |                            | , ,                                                                          | 13 14 15 16 17                                                                            |  |  |  |
| Ar<br>or  | y information copied from such Reports and Sta<br>for commercial purposes, other than using the n | tements may<br>ame and add | not be sold or used by any perso<br>dress of any political committee to      | on for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |
|           | NAME OF COMMITTEE (In Full)                                                                       |                            |                                                                              |                                                                                           |  |  |  |
|           | Help America's Leaders Political Action                                                           | Committee                  | e (HALPAC)                                                                   |                                                                                           |  |  |  |
| <u>А.</u> | Full Name (Last, First, Middle Initial)<br>John A. Douglas                                        |                            |                                                                              | Date of Receipt                                                                           |  |  |  |
|           | Mailing Address 1735 New York Avenue<br>Suite 700                                                 | NW                         |                                                                              | 07 14 Y Y Y Y<br>2006                                                                     |  |  |  |
|           | City                                                                                              | State                      | Zip Code                                                                     | Transaction ID: 1152898104287                                                             |  |  |  |
|           | Washington                                                                                        | DC                         | 20006                                                                        | Amount of Each Receipt this Period                                                        |  |  |  |
|           | FEC ID number of contributing federal political committee.                                        | C                          |                                                                              | 500.00                                                                                    |  |  |  |
|           | Name of Employer<br>Self Employed                                                                 | Occupation<br>Attorney     | 1                                                                            | - Check                                                                                   |  |  |  |
|           | Receipt For:                                                                                      | ,                          | e Year-to-Date ▼                                                             | _                                                                                         |  |  |  |
|           | Primary General                                                                                   |                            | 1000.00                                                                      | 1                                                                                         |  |  |  |
|           | Other (specify)                                                                                   | 0 0                        | 1000.00                                                                      |                                                                                           |  |  |  |
| R         | Full Name (Last, First, Middle Initial)<br>Gary J. Gasper                                         |                            |                                                                              | Date of Receipt                                                                           |  |  |  |
| υ.        | Mailing Address 8021 River Falls Dr                                                               |                            |                                                                              | 07 14 2006                                                                                |  |  |  |
|           | City                                                                                              | State                      | Zip Code                                                                     | Transaction ID: 1152897677217                                                             |  |  |  |
|           | Potomac                                                                                           | MD                         | 20854                                                                        | Amount of Each Receipt this Period                                                        |  |  |  |
|           | FEC ID number of contributing federal political committee.                                        | C                          |                                                                              | 250.00                                                                                    |  |  |  |
|           | Name of Employer<br>Ernst & Young                                                                 | Occupation<br>Partner      | ı                                                                            | - Check                                                                                   |  |  |  |
|           | Receipt For:                                                                                      | Aggregate                  | Year-to-Date 🔻                                                               |                                                                                           |  |  |  |
|           | Primary     General       Other (specify) ▼                                                       | 0 0                        | 250.00                                                                       | ]                                                                                         |  |  |  |
| <br>C.    | Full Name (Last, First, Middle Initial)<br>Barry H. Gottehrer                                     |                            |                                                                              | Date of Receipt                                                                           |  |  |  |
|           | Mailing Address 719 Arboretum Drive                                                               |                            |                                                                              | M M / D D / Y Y Y Y<br>07 14 2006                                                         |  |  |  |
|           | City                                                                                              | State                      | Zip Code                                                                     | Transaction ID: 1152897887369                                                             |  |  |  |
|           | Wilmington                                                                                        | NC                         | 28405                                                                        | Amount of Each Receipt this Period                                                        |  |  |  |
|           |                                                                                                   |                            |                                                                              | 1000.00                                                                                   |  |  |  |
|           |                                                                                                   |                            |                                                                              | - Check                                                                                   |  |  |  |
|           |                                                                                                   |                            | e Year-to-Date 🔻                                                             |                                                                                           |  |  |  |
|           | Primary     General       Other (specify) ▼                                                       |                            | 1000.00                                                                      | ]                                                                                         |  |  |  |
| s         | UBTOTAL of Receipts This Page (optional)                                                          |                            |                                                                              | 1750.00                                                                                   |  |  |  |
| т         | OTAL This Period (last page this line number or                                                   | וy)                        |                                                                              |                                                                                           |  |  |  |

| SCHEDULE A (FEC Form 3X) |                                                                                                     |                            | Use separate schedule(s)                                                  | FOR LINE NUMBER: PAGE 9 / 23<br>(check only one)                                                       |  |  |  |  |
|--------------------------|-----------------------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--|--|--|--|
| ITEMIZED RECEIPTS        |                                                                                                     |                            | or each category of the<br>Detailed Summary Page                          | $\begin{array}{c c c c c c c c c c c c c c c c c c c $                                                 |  |  |  |  |
| Ar<br>or                 | y information copied from such Reports and Stat<br>for commercial purposes, other than using the na | tements may<br>ame and add | v not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions                                                         |  |  |  |  |
| $\sum$                   | NAME OF COMMITTEE (In Full)                                                                         |                            |                                                                           |                                                                                                        |  |  |  |  |
| $\mathbb{Z}$             | Help America's Leaders Political Action                                                             | Committee                  | e (HALPAC)                                                                |                                                                                                        |  |  |  |  |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Wallace J. Henderson                                     |                            |                                                                           | Date of Receipt                                                                                        |  |  |  |  |
|                          | Mailing Address 1309 The Cir                                                                        |                            |                                                                           | M M / D D / Y Y Y Y<br>07 / 14 2006                                                                    |  |  |  |  |
|                          | City                                                                                                | State                      | Zip Code                                                                  | Transaction ID: 1152898077522                                                                          |  |  |  |  |
|                          | Austin                                                                                              | TX                         | 78704                                                                     | Amount of Each Receipt this Period                                                                     |  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                          | C                          |                                                                           | 500.00                                                                                                 |  |  |  |  |
|                          | Name of Employer<br>Public Strategies Inc.                                                          | Occupation<br>Consulta     |                                                                           | - Check                                                                                                |  |  |  |  |
|                          | Receipt For:                                                                                        |                            | Year-to-Date ▼                                                            | _                                                                                                      |  |  |  |  |
|                          | Primary General                                                                                     | 1 1                        | 500.00                                                                    | 1                                                                                                      |  |  |  |  |
|                          | Other (specify)                                                                                     | 0.0                        | 500.00                                                                    |                                                                                                        |  |  |  |  |
| в.                       | Full Name (Last, First, Middle Initial)<br>Michael Herman                                           |                            |                                                                           | Date of Receipt                                                                                        |  |  |  |  |
|                          | Mailing Address PO Box 39                                                                           |                            |                                                                           | M M M         /         D D         /         Y Y Y Y Y         Y           07         14         2006 |  |  |  |  |
|                          | City                                                                                                | State                      | Zip Code                                                                  | Transaction ID: 1152897515423                                                                          |  |  |  |  |
|                          | Duncansville                                                                                        | PA                         | 16635                                                                     | Amount of Each Receipt this Period                                                                     |  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                          | C                          |                                                                           | 250.00                                                                                                 |  |  |  |  |
|                          | Name of Employer<br>North American Communicat-<br>ions                                              | Occupatior<br>CEO          | ı                                                                         | - Check                                                                                                |  |  |  |  |
|                          | Receipt For:                                                                                        | Aggregate                  | Year-to-Date 🔻                                                            |                                                                                                        |  |  |  |  |
|                          | Primary     General       Other (specify) ▼                                                         | 0 0                        | 250.00                                                                    | ]                                                                                                      |  |  |  |  |
| <u></u>                  | Full Name (Last, First, Middle Initial)<br>Kent S. Jackson                                          |                            |                                                                           | Date of Receipt                                                                                        |  |  |  |  |
|                          | Mailing Address 14135 W 54th Street                                                                 |                            |                                                                           | 07 14 2006                                                                                             |  |  |  |  |
|                          | City                                                                                                | State                      | Zip Code                                                                  | Transaction ID: 1152897721638                                                                          |  |  |  |  |
|                          | Shawnee                                                                                             | KS                         | 66216                                                                     | Amount of Each Receipt this Period                                                                     |  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                          | C                          |                                                                           | 250.00                                                                                                 |  |  |  |  |
|                          |                                                                                                     |                            | 1                                                                         | - Check                                                                                                |  |  |  |  |
|                          |                                                                                                     |                            | e Year-to-Date 🔻                                                          |                                                                                                        |  |  |  |  |
|                          | Primary General<br>Other (specify) ▼                                                                |                            | 250.00                                                                    | ]                                                                                                      |  |  |  |  |
|                          |                                                                                                     |                            |                                                                           |                                                                                                        |  |  |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)                                                            |                            |                                                                           | 1000.00                                                                                                |  |  |  |  |
| т                        | OTAL This Period (last page this line number on                                                     | ıly)                       |                                                                           |                                                                                                        |  |  |  |  |

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| IT | CHEDULE A (FEC Form 3X)<br>EMIZED RECEIPTS                                                  |                          | Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:         PAGE 10 / 23           (check only one)         11a           X         11a           13         14           15         16 |
|----|---------------------------------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
|    | y information copied from such Reports and St for commercial purposes, other than using the |                          |                                                                              |                                                                                                                                                      |
|    | NAME OF COMMITTEE (In Full)<br>Help America's Leaders Political Action                      | Committee                | e (HALPAC)                                                                   |                                                                                                                                                      |
| Α. | Full Name (Last, First, Middle Initial)<br>W. Timothy Locke                                 |                          |                                                                              | Date of Receipt                                                                                                                                      |
|    | Mailing Address 1401 K Street NW<br>12th Floor                                              |                          |                                                                              | 07 / 14 / Y Y Y<br>006                                                                                                                               |
|    | City                                                                                        | State                    | Zip Code                                                                     | Transaction ID: 1152897921290                                                                                                                        |
|    | Washington                                                                                  | DC                       | 20005                                                                        | Amount of Each Receipt this Period                                                                                                                   |
|    | FEC ID number of contributing federal political committee.                                  | C                        |                                                                              | 500.00                                                                                                                                               |
|    | Name of Employer<br>info requested                                                          | Occupation<br>info reque |                                                                              | - Check                                                                                                                                              |
|    | Receipt For:<br>Primary General<br>Other (specify) ▼                                        | Aggregate                | Year-to-Date ▼<br>500.00                                                     |                                                                                                                                                      |
| в. | Full Name (Last, First, Middle Initial)<br>Robert A. Rapoza                                 |                          |                                                                              | Date of Receipt                                                                                                                                      |
|    | Mailing Address 3500 Tilden Street NW                                                       |                          |                                                                              | 07 14 YYYY<br>2006                                                                                                                                   |
|    | City                                                                                        | State                    | Zip Code                                                                     | Transaction ID: 1152898042179                                                                                                                        |
|    | Washington                                                                                  | DC                       | 20008                                                                        | Amount of Each Receipt this Period                                                                                                                   |
|    | FEC ID number of contributing federal political committee.                                  | C                        |                                                                              | 500.00                                                                                                                                               |
|    | Name of Employer<br>Rapoza and Associates                                                   | Occupation<br>CEO        | 1                                                                            | - Check                                                                                                                                              |
|    | Receipt For:<br>Primary General<br>Other (specify) ▼                                        | Aggregate                | Year-to-Date ▼<br>500.00                                                     |                                                                                                                                                      |

| SUBTOTAL of Receipts This Page (optional)           | ► | <br> | <br>1000.00 |
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| TOTAL This Period (last page this line number only) | ► |      | <br>7500.00 |

| S  | CHEDULE A (FEC Form 3X)                                              |                    |                                                     | FOR LINE NUMBER: PAGE 11/23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |
|----|----------------------------------------------------------------------|--------------------|-----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
|    | EMIZED RECEIPTS                                                      |                    | Use separate schedule(s)<br>or each category of the | (check only one)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
|    | EMIZED RECEIPTS                                                      |                    | Detailed Summary Page                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
| Δ  | y information copied from such Reports and Sta                       | tomonto mo         | unat he cold or used by only nore                   | 13 14 15 16 17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |
| or | for commercial purposes, other than using the r                      | name and add       | dress of any political committee to                 | o solicit contributions from such committee.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |
|    | NAME OF COMMITTEE (In Full)                                          |                    |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
|    | Help America's Leaders Political Action                              | Committee          | e (HALPAC)                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
| Α. | Full Name (Last, First, Middle Initial)<br>Alaska Air Group PAC      |                    |                                                     | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
|    | Mailing Address PO Box 68900                                         |                    |                                                     | 07 / 14 / Y Y Y Y<br>006                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
|    | City                                                                 | State              | Zip Code                                            | Transaction ID: 1152896842952                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |
|    | Seattle                                                              | WA                 | 98168                                               | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
|    | FEC ID number of contributing federal political committee.           | <b>C</b> C00       | 0024349                                             | 1000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |
|    | Name of Employer                                                     | Occupatio          | n                                                   | - Check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |
|    | Receipt For:                                                         | Aggregate          | e Year-to-Date 🔻                                    | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |
|    | Primary General                                                      |                    | 1000.00                                             | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |
|    | Other (specify) <b>v</b>                                             | 0 0                |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
| В. | Full Name (Last, First, Middle Initial)<br>American Airlines PAC     |                    |                                                     | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
|    | Mailing Address 1101 17th Street NW<br>No. 600                       |                    |                                                     | M         M         /         D         D         /         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y |  |  |  |
|    | City                                                                 | State              | Zip Code                                            | Transaction ID: 1152896876279                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |
|    | Washington                                                           | DC 20036           |                                                     | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
|    | FEC ID number of contributing federal political committee.           | <b>C</b> C00107300 |                                                     | 1000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |
|    | Name of Employer                                                     | Occupatio          | n                                                   | - Check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |
|    | Receipt For:                                                         | Aggregate          | e Year-to-Date 🔻                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
|    | Primary General                                                      |                    | 3000.00                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
|    | Other (specify) 🔻                                                    | 0 0                |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
| C. | Full Name (Last, First, Middle Initial)<br>Bracewell & Patterson PAC |                    |                                                     | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
|    | Mailing Address 2000 K St., NW                                       |                    |                                                     | 07 / 14 / Y Y Y Y<br>0 2 0 0 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |
|    | City                                                                 | State              | Zip Code                                            | Transaction ID: 1152898135739                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |
|    | Washington                                                           | DC                 | 20006                                               | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
|    | FEC ID number of contributing federal political committee.           | <b>C</b> C00       | 0021295                                             | 1000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |
|    | Name of Employer                                                     | Occupatio          | n                                                   | - Check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |
|    | Receipt For:                                                         | Aggregate          | e Year-to-Date 🔻                                    | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |
|    | Primary General                                                      |                    | 1000.00                                             | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |
|    | Other (specify)                                                      | 0 0                |                                                     | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |
| s  | LUBTOTAL of Receipts This Page (optional)                            |                    |                                                     | 3000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |
| F  | · ····································                               |                    |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
| Т  | <b>OTAL</b> This Period (last page this line number o                | nly)               | I                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |

| S                     | CHEDULE A (FEC Form 3X)                                                              |              | Lies concrete achadula(a)                           | FOR LINE NUMBER: PAGE 12/23                            |
|-----------------------|--------------------------------------------------------------------------------------|--------------|-----------------------------------------------------|--------------------------------------------------------|
|                       | EMIZED RECEIPTS                                                                      |              | Use separate schedule(s)<br>or each category of the | (check only one)                                       |
| ••                    |                                                                                      |              | Detailed Summary Page                               | $\begin{array}{ c c c c c c c c c c c c c c c c c c c$ |
| Ar                    | y information copied from such Reports and State                                     | ements may   | not be sold or used by any pers                     |                                                        |
| or                    | for commercial purposes, other than using the na                                     | me and add   | lress of any political committee to                 | solicit contributions from such committee.             |
| $\left \right\rangle$ | NAME OF COMMITTEE (In Full)                                                          | <b>_</b>     |                                                     |                                                        |
| $\vee$                | Help America's Leaders Political Action (                                            | Jommittee    | e (HALPAC)                                          |                                                        |
| Α.                    | Full Name (Last, First, Middle Initial)<br>Delta Airlines PAC                        |              |                                                     | Date of Receipt                                        |
|                       | Mailing Address PO Box 20706                                                         |              |                                                     | 07 25 2006                                             |
|                       | City                                                                                 | State        | Zip Code                                            | Transaction ID: 1153766739648                          |
|                       | Atlanta                                                                              | GA           | 30320                                               | Amount of Each Receipt this Period                     |
|                       | FEC ID number of contributing federal political committee.                           | <b>C</b> CO  | 0076133                                             | 1000.00                                                |
|                       | Name of Employer                                                                     | Occupation   | 1                                                   | Check                                                  |
|                       | Receipt For:                                                                         | Aggregate    | Year-to-Date 🔻                                      |                                                        |
|                       | Primary General                                                                      |              | 1000.00                                             | 1                                                      |
|                       | Other (specify)                                                                      | 0 0          |                                                     |                                                        |
| в.                    | Full Name (Last, First, Middle Initial)<br>EMC Corporation PAC                       |              |                                                     | Date of Receipt                                        |
|                       | Mailing Address 176 South Street                                                     |              |                                                     | 07 19 2006                                             |
|                       | City                                                                                 | State        | Zip Code                                            | Transaction ID: 1153335841630                          |
|                       | Hopkinton                                                                            | MA           | 01748                                               | Amount of Each Receipt this Period                     |
|                       | FEC ID number of contributing federal political committee.                           |              | 0385948                                             | 2000.00                                                |
|                       | Name of Employer                                                                     | Occupation   |                                                     | Check                                                  |
|                       | Receipt For:                                                                         | Aggregate    | Year-to-Date 🔻                                      |                                                        |
|                       | Primary General                                                                      |              | 2000.00                                             | 1                                                      |
|                       | Other (specify)                                                                      | 0 0          | 2000.00                                             | 1                                                      |
| с.                    | Full Name (Last, First, Middle Initial)<br>General Aviation Mfturs Assoc. (GAMA) PAC |              |                                                     | Date of Receipt                                        |
|                       | Mailing Address 1400 K Street NW<br>Suite 801                                        |              |                                                     | 07 / 14 / 2006                                         |
|                       | City                                                                                 | State        | Zip Code                                            | Transaction ID: 1152897236319                          |
|                       | Washington                                                                           | DC           | 20005                                               | Amount of Each Receipt this Period                     |
|                       | FEC ID number of contributing federal political committee.                           | <b>C</b> COO | 0014878                                             | 1000.00                                                |
|                       | Name of Employer                                                                     | Occupation   | 1                                                   | - Check                                                |
|                       | Receipt For:                                                                         | Aggregate    | Year-to-Date V                                      |                                                        |
|                       | Primary General                                                                      |              | 1000.00                                             | 1                                                      |
|                       | Other (specify)                                                                      | 0 0          | · · · · · · · · · · · · · · · · · · ·               | 1                                                      |
| s                     | UBTOTAL of Receipts This Page (optional)                                             |              |                                                     | 4000.00                                                |
| т                     | OTAL This Period (last page this line number onl                                     | ly)          |                                                     |                                                        |

| S         | CHEDULE A (FEC Form 3X)                                                                           |              | Use separate schedule(s)           | FOR LINE NUMBER: PAGE 13/23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |  |  |
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|           | EMIZED RECEIPTS                                                                                   |              | or each category of the            | (check only one)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |
|           | -                                                                                                 |              | Detailed Summary Page              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| Ar        | y information copied from such Reports and Sta<br>for commercial purposes, other than using the r | atements may | r not be sold or used by any perso | on for the purpose of soliciting contributions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |  |  |  |  |  |  |
|           | NAME OF COMMITTEE (In Full)                                                                       |              | areas or any pointear committee to |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| $\rangle$ | Help America's Leaders Political Action                                                           | Committee    | e (HALPAC)                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| Α.        | Full Name (Last, First, Middle Initial)<br>Honeywell International PAC                            |              |                                    | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|           | Mailing Address 1001 Pennsylvania Ave<br>Suite 700                                                | nue          |                                    | 07 14 Y Y Y Y<br>006                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |
|           | City                                                                                              | State        | Zip Code                           | Transaction ID: 1152897091947                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |
|           | Washington                                                                                        | DC           | 20004                              | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |
|           | FEC ID number of contributing federal political committee.                                        | <b>C</b> COO | 0096156                            | 1000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |  |
|           | Name of Employer                                                                                  | Occupation   | 1                                  | - Check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |  |
|           | Receipt For:<br>Primary General                                                                   | Aggregate    | e Year-to-Date 🔻                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|           | Other (specify)                                                                                   | 0 0          | 1000.00                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|           | Full Name (Last, First, Middle Initial)                                                           |              |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| В.        | Jim Beam Brands Co. PAC<br>Mailing Address 510 Lake Cook Road                                     |              |                                    | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|           |                                                                                                   |              |                                    | 07 14 2006                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |  |  |  |  |  |  |
|           | City                                                                                              | State        | Zip Code                           | Transaction ID: 1152898163270                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |
|           | Deerfield                                                                                         | IL           | 60015                              | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |
|           | FEC ID number of contributing federal political committee.                                        | <b>C</b> C00 | 0194126                            | 2000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |  |
|           | Name of Employer                                                                                  | Occupation   | 1                                  | Check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |
|           | Receipt For:                                                                                      | Aggregate    | e Year-to-Date 🔻                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|           | Primary General<br>Other (specify) ▼                                                              |              | 2000.00                            | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |  |
|           | Full Name (Last Fluct Mildle 1991)                                                                | U            |                                    | 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |  |
| C.        | Full Name (Last, First, Middle Initial)<br>King & Spalding Nonpartisan PAC                        |              |                                    | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|           | Mailing Address 191 Peachtree St.                                                                 |              |                                    | M - M         /         D - D         Y         Y - Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         < |  |  |  |  |  |  |  |  |  |  |
|           | City                                                                                              | State        | Zip Code                           | Transaction ID: 1152897363238                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |
|           | Atlanta                                                                                           | GA           | 30303                              | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |
|           | FEC ID number of contributing federal political committee.                                        | <b>C</b> C00 | 0204453                            | 1000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |  |
|           | Name of Employer                                                                                  | Occupatior   |                                    | Check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |
|           | Receipt For:                                                                                      | Aggregate    | e Year-to-Date ▼                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|           | Primary General<br>Other (specify) ▼                                                              |              | 1000.00                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| s         | UBTOTAL of Receipts This Page (optional)                                                          |              | ······                             | 4000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |  |
|           |                                                                                                   |              |                                    | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |  |
| Т         | <b>OTAL</b> This Period (last page this line number of                                            | only)        |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |

| S  | CHEDULE A (FEC Form 3X)                                                                              |              |                                                     | FOR LINE NUMBER: PAGE 14 / 23              |  |  |  |  |  |  |  |  |  |  |
|----|------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------|--------------------------------------------|--|--|--|--|--|--|--|--|--|--|
|    | EMIZED RECEIPTS                                                                                      |              | Use separate schedule(s)<br>or each category of the | (check only one)                           |  |  |  |  |  |  |  |  |  |  |
|    |                                                                                                      |              | Detailed Summary Page                               |                                            |  |  |  |  |  |  |  |  |  |  |
| Δ. | winformation against from such Departs and Stat                                                      | omonto moi   | , not be cold or used by only nore                  | 13 14 15 16 17                             |  |  |  |  |  |  |  |  |  |  |
| or | y information copied from such Reports and State<br>for commercial purposes, other than using the na | ame and add  | lress of any political committee to                 | solicit contributions from such committee. |  |  |  |  |  |  |  |  |  |  |
|    | NAME OF COMMITTEE (In Full)                                                                          |              |                                                     |                                            |  |  |  |  |  |  |  |  |  |  |
|    | Help America's Leaders Political Action (                                                            | Committee    | e (HALPAC)                                          |                                            |  |  |  |  |  |  |  |  |  |  |
| Α. | Full Name (Last, First, Middle Initial)<br>L-3 Communications Corp. PAC                              |              |                                                     | Date of Receipt                            |  |  |  |  |  |  |  |  |  |  |
|    | Mailing Address 600 Third Avenue                                                                     |              |                                                     | 07 / 14 / Y Y Y Y<br>006                   |  |  |  |  |  |  |  |  |  |  |
|    | City                                                                                                 | State        | Zip Code                                            | Transaction ID: 1152897392050              |  |  |  |  |  |  |  |  |  |  |
|    | New York                                                                                             | NY           | 10016                                               | Amount of Each Receipt this Period         |  |  |  |  |  |  |  |  |  |  |
|    | FEC ID number of contributing federal political committee.                                           | <b>C</b> COO | 0338087                                             | 1000.00                                    |  |  |  |  |  |  |  |  |  |  |
|    | Name of Employer                                                                                     | Occupation   | 1                                                   | - Check                                    |  |  |  |  |  |  |  |  |  |  |
|    | Receipt For:                                                                                         | Aggregate    | Year-to-Date V                                      | 1                                          |  |  |  |  |  |  |  |  |  |  |
|    | Primary General                                                                                      |              | 5000.00                                             | 1                                          |  |  |  |  |  |  |  |  |  |  |
|    | Other (specify)                                                                                      | 0 0          |                                                     |                                            |  |  |  |  |  |  |  |  |  |  |
|    | Full Name (Last, First, Middle Initial)<br>Lorillard Tobacco Company Public Affairs Committe         | •            |                                                     | Date of Receipt                            |  |  |  |  |  |  |  |  |  |  |
| Ъ. | Mailing Address 714 Green Valley Road                                                                |              |                                                     |                                            |  |  |  |  |  |  |  |  |  |  |
|    |                                                                                                      |              |                                                     | 07 14 2006                                 |  |  |  |  |  |  |  |  |  |  |
|    | City                                                                                                 | State        | Zip Code                                            | Transaction ID: 1152898220097              |  |  |  |  |  |  |  |  |  |  |
|    | Greensboro                                                                                           | NC           | 27408                                               | Amount of Each Receipt this Period         |  |  |  |  |  |  |  |  |  |  |
|    | FEC ID number of contributing federal political committee.                                           | <b>C</b> CO  | 0112888                                             | 2000.00                                    |  |  |  |  |  |  |  |  |  |  |
|    | Name of Employer                                                                                     | Occupation   | l                                                   | - Check                                    |  |  |  |  |  |  |  |  |  |  |
|    | Receipt For:                                                                                         | Aggregate    | Year-to-Date V                                      | -                                          |  |  |  |  |  |  |  |  |  |  |
|    | Primary General                                                                                      |              |                                                     | 1                                          |  |  |  |  |  |  |  |  |  |  |
|    | Other (specify)                                                                                      | 0 0          | 2000.00                                             |                                            |  |  |  |  |  |  |  |  |  |  |
| с. | Full Name (Last, First, Middle Initial)<br>National Air Transportation Assoc. PAC                    |              |                                                     | Date of Receipt                            |  |  |  |  |  |  |  |  |  |  |
| 0. | Mailing Address 4226 King Street                                                                     |              |                                                     |                                            |  |  |  |  |  |  |  |  |  |  |
|    |                                                                                                      |              |                                                     | 07 14 2006                                 |  |  |  |  |  |  |  |  |  |  |
|    | City                                                                                                 | State        | Zip Code                                            | Transaction ID: 1152897423550              |  |  |  |  |  |  |  |  |  |  |
|    | Alexandria                                                                                           | VA           | 22302                                               | Amount of Each Receipt this Period         |  |  |  |  |  |  |  |  |  |  |
|    | FEC ID number of contributing federal political committee.                                           | <b>C</b> COO | 0340554                                             | 1000.00                                    |  |  |  |  |  |  |  |  |  |  |
|    | Name of Employer                                                                                     | Occupation   | 1                                                   | - Check                                    |  |  |  |  |  |  |  |  |  |  |
|    | Receipt For:                                                                                         | Aggregate    | Year-to-Date 🔻                                      |                                            |  |  |  |  |  |  |  |  |  |  |
|    | Primary General                                                                                      |              | 1000.00                                             | 1                                          |  |  |  |  |  |  |  |  |  |  |
|    | Other (specify)                                                                                      | 0 0          |                                                     | 1                                          |  |  |  |  |  |  |  |  |  |  |
| s  | UBTOTAL of Receipts This Page (optional)                                                             | 4000.00      |                                                     |                                            |  |  |  |  |  |  |  |  |  |  |
|    |                                                                                                      |              |                                                     |                                            |  |  |  |  |  |  |  |  |  |  |
| Т  | OTAL This Period (last page this line number on                                                      | ly)          |                                                     |                                            |  |  |  |  |  |  |  |  |  |  |

|              | CHEDULE A (FEC Form 3X)<br>EMIZED RECEIPTS                                                          |              | Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:         PAGE 15 / 23           (check only one)         11a           11b         11c           12 |  |  |  |  |  |  |  |  |  |  |
|--------------|-----------------------------------------------------------------------------------------------------|--------------|------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|
| <b>A</b>     | uinformation conied from such Departs and Stat                                                      | amanta mai   | , 3                                                                          | 13 14 15 16 17                                                                                                      |  |  |  |  |  |  |  |  |  |  |
| or           | y information copied from such Reports and Stat<br>for commercial purposes, other than using the na | ame and add  | Iress of any political committee to                                          | solicit contributions from such committee.                                                                          |  |  |  |  |  |  |  |  |  |  |
| Ν            | NAME OF COMMITTEE (In Full)                                                                         | <b>.</b>     |                                                                              |                                                                                                                     |  |  |  |  |  |  |  |  |  |  |
| $\backslash$ | Help America's Leaders Political Action (                                                           | Committee    | e (HALPAC)                                                                   |                                                                                                                     |  |  |  |  |  |  |  |  |  |  |
| Α.           | Full Name (Last, First, Middle Initial)<br>National Association of Insurance & Financial Advise     | ors          |                                                                              | Date of Receipt                                                                                                     |  |  |  |  |  |  |  |  |  |  |
|              | Mailing Address 2901 Telestar Court                                                                 |              |                                                                              | M M / D D / Y Y Y Y<br>07 14 2006                                                                                   |  |  |  |  |  |  |  |  |  |  |
|              | City                                                                                                | State        | Zip Code                                                                     | Transaction ID: 1152898251440                                                                                       |  |  |  |  |  |  |  |  |  |  |
|              | Falls Church                                                                                        | VA           | 22042                                                                        | Amount of Each Receipt this Period                                                                                  |  |  |  |  |  |  |  |  |  |  |
|              | FEC ID number of contributing<br>federal political committee.                                       | <b>C</b> CO  | 0005249                                                                      | 2000.00                                                                                                             |  |  |  |  |  |  |  |  |  |  |
|              | Name of Employer                                                                                    | Occupation   | 1                                                                            | - Check                                                                                                             |  |  |  |  |  |  |  |  |  |  |
|              | Descript For                                                                                        | A            | Veer te Dete                                                                 | _                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|              | Receipt For:<br>Primary General                                                                     | Aggregate    | Year-to-Date ▼                                                               | 1                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|              | Other (specify)                                                                                     | 0 0          | 2000.00                                                                      |                                                                                                                     |  |  |  |  |  |  |  |  |  |  |
| В.           | Full Name (Last, First, Middle Initial)<br>National Business Aviation Assoc. PAC                    |              |                                                                              | Date of Receipt                                                                                                     |  |  |  |  |  |  |  |  |  |  |
|              | Mailing Address 1200 18th Street NW                                                                 |              |                                                                              | 07 14 2006                                                                                                          |  |  |  |  |  |  |  |  |  |  |
|              | City                                                                                                | State        | Zip Code                                                                     | Transaction ID: 1152897641967                                                                                       |  |  |  |  |  |  |  |  |  |  |
|              | Washington                                                                                          | DC           | 20036                                                                        | Amount of Each Receipt this Period                                                                                  |  |  |  |  |  |  |  |  |  |  |
|              | FEC ID number of contributing federal political committee.                                          | <b>C</b> COO | 0319723                                                                      | 1000.00                                                                                                             |  |  |  |  |  |  |  |  |  |  |
|              | Name of Employer                                                                                    | Occupation   | 1                                                                            | Check                                                                                                               |  |  |  |  |  |  |  |  |  |  |
|              | Receipt For:                                                                                        | Aggregate    | Year-to-Date 🔻                                                               | _                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|              | Primary     General       Other (specify) ▼                                                         | 0 0          | 1000.00                                                                      | ]                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| <br>C.       | Full Name (Last, First, Middle Initial)<br>RJ Revnolds Political Action Committee                   |              |                                                                              | Date of Receipt                                                                                                     |  |  |  |  |  |  |  |  |  |  |
|              | Mailing Address P.O. Box 718                                                                        |              |                                                                              | M M / D D / Y Y Y Y                                                                                                 |  |  |  |  |  |  |  |  |  |  |
|              | 401 N. Main Street<br>City                                                                          | State        | Zip Code                                                                     | 0 7 1 4 2 0 0 6<br>Transaction ID: 1152898312236                                                                    |  |  |  |  |  |  |  |  |  |  |
|              | Winston-Salem                                                                                       | NC           | 27102                                                                        | Amount of Each Receipt this Period                                                                                  |  |  |  |  |  |  |  |  |  |  |
|              | FEC ID number of contributing federal political committee.                                          | <b>C</b> C00 | 0042002                                                                      | 2000.00                                                                                                             |  |  |  |  |  |  |  |  |  |  |
|              | Name of Employer                                                                                    | Occupation   | 1                                                                            | Check                                                                                                               |  |  |  |  |  |  |  |  |  |  |
|              | Receipt For:<br>Primary General<br>Other (specify) ▼                                                | Aggregate    | Year-to-Date V<br>2000.00                                                    | ]                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| s            | UBTOTAL of Receipts This Page (optional)                                                            |              | ••••••                                                                       | 5000.00                                                                                                             |  |  |  |  |  |  |  |  |  |  |
| Т            | OTAL This Period (last page this line number on                                                     | ly)          |                                                                              |                                                                                                                     |  |  |  |  |  |  |  |  |  |  |

| S                       | CHEDULE A (FEC Form 3X)                                                   |              |                                                     | FOR LINE NUMBER: PAGE 16 / 23                                    |  |  |  |  |  |  |  |  |  |  |
|-------------------------|---------------------------------------------------------------------------|--------------|-----------------------------------------------------|------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|
|                         | EMIZED RECEIPTS                                                           |              | Use separate schedule(s)<br>or each category of the | (check only one)                                                 |  |  |  |  |  |  |  |  |  |  |
| 11                      |                                                                           |              | Detailed Summary Page                               |                                                                  |  |  |  |  |  |  |  |  |  |  |
| Δr                      | y information copied from such Reports and State                          | emente may   | not be sold or used by any perce                    | 13 14 15 16 17                                                   |  |  |  |  |  |  |  |  |  |  |
| or                      | for commercial purposes, other than using the na                          | ame and add  | lress of any political committee to                 | solicit contributions from such committee.                       |  |  |  |  |  |  |  |  |  |  |
| $\overline{\mathbf{N}}$ | NAME OF COMMITTEE (In Full)                                               |              |                                                     |                                                                  |  |  |  |  |  |  |  |  |  |  |
| $\mathbb{Z}$            | Help America's Leaders Political Action (                                 | Committee    | e (HALPAC)                                          |                                                                  |  |  |  |  |  |  |  |  |  |  |
| A.                      | Full Name (Last, First, Middle Initial)<br>Simmons for Congress           |              |                                                     | Date of Receipt                                                  |  |  |  |  |  |  |  |  |  |  |
|                         | Mailing Address PO Box 268                                                |              |                                                     | 07 / 31 / Y Y Y Y<br>2006                                        |  |  |  |  |  |  |  |  |  |  |
|                         | City                                                                      | State        | Zip Code                                            | Transaction ID: 1154621868816                                    |  |  |  |  |  |  |  |  |  |  |
|                         | Stonington                                                                | СТ           | 06378                                               | Amount of Each Receipt this Period                               |  |  |  |  |  |  |  |  |  |  |
|                         | FEC ID number of contributing federal political committee.                | <b>C</b> COO | 0343921                                             | 1500.00                                                          |  |  |  |  |  |  |  |  |  |  |
|                         | Name of Employer                                                          | Occupation   | 1                                                   | - Check                                                          |  |  |  |  |  |  |  |  |  |  |
|                         | Receipt For: 006"                                                         | Aggregate    | Year-to-Date V                                      |                                                                  |  |  |  |  |  |  |  |  |  |  |
|                         | Primary General                                                           |              | 1500.00                                             | 1                                                                |  |  |  |  |  |  |  |  |  |  |
|                         | Other (specify)                                                           | 0.0          |                                                     | 1                                                                |  |  |  |  |  |  |  |  |  |  |
| в.                      | Full Name (Last, First, Middle Initial)<br>USTeam PAC                     |              |                                                     | Date of Receipt                                                  |  |  |  |  |  |  |  |  |  |  |
|                         | Mailing Address 100 West Putnam Ave.                                      |              | M M / D D / Y Y Y Y<br>07 14 2006                   |                                                                  |  |  |  |  |  |  |  |  |  |  |
|                         | City                                                                      | State        | Zip Code                                            | Transaction ID: 1152898339454                                    |  |  |  |  |  |  |  |  |  |  |
|                         | Greenwich                                                                 | CT           | 06830                                               | Amount of Each Receipt this Period                               |  |  |  |  |  |  |  |  |  |  |
|                         | FEC ID number of contributing federal political committee.                | C COO        | 0104851                                             | 2500.00                                                          |  |  |  |  |  |  |  |  |  |  |
|                         | Name of Employer                                                          | Occupation   | 1                                                   | - Check                                                          |  |  |  |  |  |  |  |  |  |  |
|                         | Receipt For:                                                              | Aggregate    | Year-to-Date V                                      | _                                                                |  |  |  |  |  |  |  |  |  |  |
|                         | Primary General                                                           |              | 2500.00                                             |                                                                  |  |  |  |  |  |  |  |  |  |  |
|                         | Other (specify)                                                           | 0 0          | 2500.00                                             |                                                                  |  |  |  |  |  |  |  |  |  |  |
| C.                      | Full Name (Last, First, Middle Initial)<br>United Parcel Service Inc. PAC |              |                                                     | Date of Receipt                                                  |  |  |  |  |  |  |  |  |  |  |
| -                       | Mailing Address 55 Glenlake Parkway, NE                                   | E            |                                                     | M M / D D / Y Y Y Y                                              |  |  |  |  |  |  |  |  |  |  |
|                         |                                                                           |              | Zin Cada                                            | 07 14 2006                                                       |  |  |  |  |  |  |  |  |  |  |
|                         | City<br>Atlanta                                                           | State<br>GA  | Zip Code<br>30328                                   | Transaction ID: 1152898422468 Amount of Each Receipt this Period |  |  |  |  |  |  |  |  |  |  |
|                         | FEC ID number of contributing                                             |              |                                                     |                                                                  |  |  |  |  |  |  |  |  |  |  |
|                         | federal political committee.                                              |              | 0064766                                             | 1000.00                                                          |  |  |  |  |  |  |  |  |  |  |
|                         | Name of Employer                                                          | Occupatior   | 1                                                   | Check                                                            |  |  |  |  |  |  |  |  |  |  |
|                         | Receipt For:                                                              | Aggregate    | Year-to-Date V                                      | _                                                                |  |  |  |  |  |  |  |  |  |  |
|                         | Primary General<br>Other (specify) ▼                                      |              | 5000.00                                             | 1                                                                |  |  |  |  |  |  |  |  |  |  |
| _                       |                                                                           | <u> </u>     |                                                     | 1                                                                |  |  |  |  |  |  |  |  |  |  |
| s                       | UBTOTAL of Receipts This Page (optional)                                  |              |                                                     | 5000.00                                                          |  |  |  |  |  |  |  |  |  |  |
|                         |                                                                           |              | · · ·                                               |                                                                  |  |  |  |  |  |  |  |  |  |  |
| Т                       | OTAL This Period (last page this line number on                           | ly)          | ····· •                                             |                                                                  |  |  |  |  |  |  |  |  |  |  |

| IT               | CHEDULE A (FEC Form 3X)<br>EMIZED RECEIPTS                                                           |                           | Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:       PAGE 17 / 23         (check only one)       11a         11a       11b       11c       12         13       14       15       16       17 |  |  |  |  |  |  |  |  |  |  |  |
|------------------|------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|
| Ar               | y information copied from such Reports and State<br>for commercial purposes, other than using the na | ements may<br>ime and add | r not be sold or used by any perso<br>lress of any political committee to    | on for the purpose of soliciting contributions<br>solicit contributions from such committee.                                                                   |  |  |  |  |  |  |  |  |  |  |  |
| $\left[ \right]$ | NAME OF COMMITTEE (In Full)                                                                          |                           |                                                                              |                                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |
| $\mathbb{Z}$     | Help America's Leaders Political Action (                                                            | Committee                 | e (HALPAC)                                                                   |                                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |
| Α.               | Full Name (Last, First, Middle Initial)<br>United Parcel Service Inc. PAC                            |                           |                                                                              | Date of Receipt                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |
|                  | Mailing Address 55 Glenlake Parkway, NE                                                              | Ē                         |                                                                              | 07 / <sup>D</sup> D / Y Y Y Y<br>02006                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |
|                  | City                                                                                                 | State                     | Zip Code                                                                     | Transaction ID: 1152898439187                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |
|                  | Atlanta                                                                                              | GA                        | 30328                                                                        | Amount of Each Receipt this Period                                                                                                                             |  |  |  |  |  |  |  |  |  |  |  |
|                  | FEC ID number of contributing federal political committee.                                           | <b>C</b> CO               | 0064766                                                                      | 2000.00                                                                                                                                                        |  |  |  |  |  |  |  |  |  |  |  |
|                  | Name of Employer                                                                                     | Occupation                | 1                                                                            | - Check                                                                                                                                                        |  |  |  |  |  |  |  |  |  |  |  |
|                  | Receipt For:                                                                                         | Aggregate                 | Year-to-Date 🔻                                                               |                                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |
|                  | Primary General<br>Other (specify) ▼                                                                 |                           | 5000.00                                                                      | ]                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |
|                  | Full Name (Last, First, Middle Initial)<br>Ven-PAC                                                   |                           |                                                                              | Date of Pessint                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |
| Б.               | Mailing Address PO Box 83142                                                                         | Date of Receipt           |                                                                              |                                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |
|                  | City                                                                                                 | State                     | Zip Code                                                                     | Transaction ID: 1152898196379                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |  |
|                  | Gaithersburg                                                                                         | MD                        | 20883                                                                        | Amount of Each Receipt this Period                                                                                                                             |  |  |  |  |  |  |  |  |  |  |  |
|                  | FEC ID number of contributing federal political committee.                                           | <b>C</b> C00              | 0369660                                                                      | 1000.00                                                                                                                                                        |  |  |  |  |  |  |  |  |  |  |  |
|                  | Name of Employer                                                                                     | Occupation                |                                                                              | Check                                                                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |
|                  | Receipt For:                                                                                         | Info Requ                 | vested<br>Year-to-Date ▼                                                     | -                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |
|                  | Primary General<br>Other (specify) $rightarrow$                                                      |                           | 1000.00                                                                      | ]                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |
| <u>с.</u>        | Full Name (Last, First, Middle Initial)<br>WineandSpirits WholesalersofAmerica PAC                   |                           |                                                                              | Date of Receipt                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |
|                  | Mailing Address 805 Fifteenth Street NW Suite 430                                                    |                           |                                                                              | M M / D D / Y Y Y Y<br>07 14 2006                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |
|                  | City<br>Washington                                                                                   | State<br>DC               | Zip Code<br>20005                                                            | Transaction ID: 1152898377235 Amount of Each Receipt this Period                                                                                               |  |  |  |  |  |  |  |  |  |  |  |
|                  | FEC ID number of contributing federal political committee.                                           |                           | )147173                                                                      | 1000.00                                                                                                                                                        |  |  |  |  |  |  |  |  |  |  |  |
|                  | Name of Employer                                                                                     | Occupation                | 1                                                                            | Check                                                                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |
|                  | Receipt For:<br>Primary General<br>Other (specify) ▼                                                 | Aggregate                 | Year-to-Date V<br>1000.00                                                    | ]                                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |
| s                | UBTOTAL of Receipts This Page (optional)                                                             | 4000.00                   |                                                                              |                                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |
|                  | OTAL This Period (last page this line number onl                                                     |                           |                                                                              | 29000.00                                                                                                                                                       |  |  |  |  |  |  |  |  |  |  |  |

|                             | CHEDULE A (FEC Form 3X)<br>EMIZED RECEIPTS                                                        |              | Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:         PAGE 18 / 23           (check only one)         11a         11b         11c         12           13         14         15         X         16 | 17 |  |  |  |  |  |  |
|-----------------------------|---------------------------------------------------------------------------------------------------|--------------|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|--|--|--|--|--|
|                             | y information copied from such Reports and Sta<br>for commercial purposes, other than using the n |              |                                                                              |                                                                                                                                                                         |    |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full) |                                                                                                   |              |                                                                              |                                                                                                                                                                         |    |  |  |  |  |  |  |
| $\langle \rangle$           | Help America's Leaders Political Action                                                           |              |                                                                              |                                                                                                                                                                         |    |  |  |  |  |  |  |
| Α.                          | Full Name (Last, First, Middle Initial)<br>Weldon Victory Committee                               |              |                                                                              | Date of Receipt                                                                                                                                                         |    |  |  |  |  |  |  |
|                             | Mailing Address PO Box 1992                                                                       |              |                                                                              | 07 / 25 / Y Y Y Y<br>0 06                                                                                                                                               |    |  |  |  |  |  |  |
|                             | City                                                                                              | State        | Zip Code                                                                     | Transaction ID: 1153766838395                                                                                                                                           |    |  |  |  |  |  |  |
|                             | Media                                                                                             | PA           | 19063                                                                        | Amount of Each Receipt this Period                                                                                                                                      |    |  |  |  |  |  |  |
|                             | FEC ID number of contributing federal political committee.                                        | <b>C</b> C00 | 175869                                                                       | 4000.00                                                                                                                                                                 |    |  |  |  |  |  |  |
|                             | Name of Employer Occ                                                                              |              |                                                                              | Check                                                                                                                                                                   |    |  |  |  |  |  |  |
|                             | Receipt For:<br>Primary General<br>Other (specify) ▼                                              | Aggregate    | Year-to-Date ▼<br>4000.00                                                    |                                                                                                                                                                         |    |  |  |  |  |  |  |

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

| SCHEDULE A (FEC Form 3X)<br>ITEMIZED RECEIPTS                                                       | Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page           | FOR LINE NUMBER:       PAGE 19 / 23         (check only one)       11a         11a       11b       11c       12         13       14       15       16       17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|
| Any information copied from such Reports and St<br>or for commercial purposes, other than using the | for the purpose of soliciting contributions solicit contributions from such committee. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full)                                                                         |                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |
| Help America's Leaders Political Action                                                             | Committee (HALPAC)                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)           A.         Citizens National Bank                 | Date of Receipt                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |
| Mailing Address PO Box 760                                                                          |                                                                                        | M         M         /         D         D         /         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y |  |  |  |  |  |  |  |  |
| City                                                                                                | State Zip Code                                                                         | Transaction ID: 1155829288540                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |
| Somerset                                                                                            | KY 42502                                                                               | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                          | C                                                                                      | 167.69                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |
| Name of Employer                                                                                    | Occupation                                                                             | - Interest                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |  |  |  |  |
| Receipt For:                                                                                        | Aggregate Year-to-Date ▼                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |
| Other (specify) ▼                                                                                   | 1334.89                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |

| SUBTOTAL of Receipts This Page (optional)           | ► | 167.69 |
|-----------------------------------------------------|---|--------|
| TOTAL This Period (last page this line number only) | ► | 167.69 |

| S         | CHEDULE B (FEC Form 3X)                                                                                |                                    |                                         |      |             |             | NE NUMBER: PAGE 20 / 23                                                                                                                                           |                  |      |        |      |                   |           |                  |    |     |
|-----------|--------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------|------|-------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------|--------|------|-------------------|-----------|------------------|----|-----|
| IT        | EMIZED DISBURSEMENTS                                                                                   | for each o                         | category of the<br>Summary Page         |      | (i)<br>X    | heck o      |                                                                                                                                                                   | ne)<br>22        |      | 23     |      | 24                |           | 25               |    | 26  |
|           |                                                                                                        |                                    |                                         |      |             | 27          |                                                                                                                                                                   | 28a              |      | 28b    |      | 28c               |           | 29               |    | 30b |
|           | y Information copied from such Reports and Statem<br>or commercial purposes, other than using the name |                                    |                                         |      |             |             |                                                                                                                                                                   |                  |      |        |      |                   |           |                  | S  |     |
|           | NAME OF COMMITTEE (In Full)                                                                            |                                    |                                         | 0011 |             |             | 5010                                                                                                                                                              |                  | ibut |        |      | 500110            |           |                  |    |     |
| $\rangle$ | Help America's Leaders Political Action Co                                                             | mmittee (                          | HALPAC)                                 |      |             |             |                                                                                                                                                                   |                  |      |        |      |                   |           |                  |    |     |
| Α.        | Full Name (Last, First, Middle Initial)<br>American Express                                            |                                    |                                         |      |             |             |                                                                                                                                                                   | Trans<br>Date o  |      | isburs | seme |                   | 750       | 8885             |    |     |
|           | Mailing Address PO Box 360001                                                                          |                                    |                                         |      |             |             | $\begin{array}{c c} & M & M \\ \hline 0 & 7 & 7 \\ \hline \end{array} & 7 & 2 & 8 \\ \hline \end{array} & 7 & 2 & 0 & 0 & 6 \\ \hline \end{array} \\ \end{array}$ |                  |      |        |      |                   |           |                  |    |     |
|           | City S<br>Ft. Lauderdale                                                                               |                                    | Amount of Each Disbursement this Period |      |             |             |                                                                                                                                                                   |                  |      |        |      |                   | 1         |                  |    |     |
|           | Purpose of Disbursement<br>credit card - see attached<br>Candidate Name                                |                                    |                                         |      | 00          | )1<br>gory/ |                                                                                                                                                                   | L.               |      |        |      |                   |           | 105.             | 00 |     |
|           |                                                                                                        | ment For:                          |                                         |      | Ту          | • •         |                                                                                                                                                                   |                  |      |        |      |                   |           |                  |    |     |
|           | Senate<br>President                                                                                    | Primary<br>Other (spe              | General                                 |      |             |             |                                                                                                                                                                   |                  |      |        |      |                   |           |                  |    |     |
|           | State: District:<br>Full Name (Last, First, Middle Initial)                                            |                                    |                                         |      |             |             |                                                                                                                                                                   |                  |      |        |      |                   |           |                  |    |     |
| В.        | Capitol Hill Club                                                                                      |                                    |                                         |      |             |             |                                                                                                                                                                   | Date o           |      | isburs | eme  | 15582<br>ent      |           |                  |    |     |
|           | Mailing Address 300 First Street, SE                                                                   |                                    |                                         |      |             |             |                                                                                                                                                                   | 07               |      |        | 28   |                   |           | 0 ò 6            |    |     |
|           | Washington                                                                                             |                                    |                                         |      |             |             |                                                                                                                                                                   |                  | nt o | f Each | n Di | sburse            | men       | t this I<br>105. |    | i   |
|           | Purpose of Disbursement<br>PAC dues for food/bev                                                       |                                    | 00                                      | 01   |             | <u> </u>    |                                                                                                                                                                   |                  |      |        |      | 105.              | 00        |                  |    |     |
|           | Candidate Name                                                                                         |                                    |                                         |      | gory/<br>pe |             | MEM                                                                                                                                                               | ი I              | тем  | 1      |      |                   |           |                  |    |     |
|           | Senate<br>President                                                                                    | ment For:<br>Primary<br>Other (spe | General                                 |      |             |             |                                                                                                                                                                   | see cł<br>ress c |      |        |      | erican<br>or \$1( | Exp<br>05 | 0-               |    |     |
|           | State:     District:       Full Name (Last, First, Middle Initial)                                     |                                    |                                         |      |             |             | _                                                                                                                                                                 |                  |      |        |      |                   |           |                  |    |     |
| C.        | UST                                                                                                    |                                    |                                         |      |             |             |                                                                                                                                                                   | Date of          | of D | isburs | seme |                   |           |                  | Y  |     |
|           | Mailing Address 655 15th Street, NW<br>Suite 410                                                       |                                    |                                         |      |             |             |                                                                                                                                                                   | 07               |      |        | 2 4  |                   |           | 0 ò e            |    |     |
|           |                                                                                                        | State<br>DC                        | Zip Code<br>20010                       |      |             |             |                                                                                                                                                                   | Amou             | nt o | t Each | n Di | sburse            | -         |                  |    |     |
|           | Purpose of Disbursement<br>PAC airfare                                                                 |                                    |                                         |      | 00          | )2          |                                                                                                                                                                   | L.               |      |        |      |                   | 4         | 089.             | 60 |     |
|           | Candidate Name                                                                                         |                                    |                                         |      | gory/<br>pe |             |                                                                                                                                                                   |                  |      |        |      |                   |           |                  |    |     |
|           | Office Sought: House Disburse<br>Senate President<br>State: District:                                  | ment For:<br>Primary<br>Other (spe | General                                 |      |             |             |                                                                                                                                                                   |                  |      |        |      |                   |           |                  |    |     |
| s         | UBTOTAL of Disbursements This Page (optional) .                                                        |                                    |                                         |      |             | ►           |                                                                                                                                                                   |                  |      |        |      |                   | 4         | 194.             | 60 | 7   |
|           | TOTAL This Period (last page this line number only)                                                    |                                    |                                         |      |             |             |                                                                                                                                                                   |                  |      |        |      |                   |           |                  |    |     |
| L         | - •,                                                                                                   |                                    |                                         |      |             |             |                                                                                                                                                                   |                  |      |        |      |                   |           |                  |    |     |

| S   | CHEDULE B (FEC Form 3X)                                                                                 | Use seperate schedule(s)                                 |     | -             | INE NUMBER: PAGE 21 / 23         |                                                                                                                         |  |  |  |  |  |  |  |  |
|-----|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-----|---------------|----------------------------------|-------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|
| IT  | EMIZED DISBURSEMENTS                                                                                    | for each category of the<br>Detailed Summary Page        |     | Check only    | one)<br>22 X 23                  | 24 25 26                                                                                                                |  |  |  |  |  |  |  |  |
|     |                                                                                                         |                                                          |     | 27            | 28a 28b                          | 28c 29 30b                                                                                                              |  |  |  |  |  |  |  |  |
|     | y Information copied from such Reports and Statem<br>for commercial purposes, other than using the name |                                                          |     |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | NAME OF COMMITTEE (In Full)                                                                             |                                                          |     |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
| V   | Help America's Leaders Political Action Co                                                              | mmittee (HALPAC)                                         |     |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
| Α.  | Full Name (Last, First, Middle Initial)<br>Chris Shays for Congress                                     |                                                          |     |               |                                  | D: 1153337611491                                                                                                        |  |  |  |  |  |  |  |  |
|     |                                                                                                         |                                                          |     |               | Date of Disbur                   |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | Mailing Address P.O. Box 275                                                                            |                                                          |     |               | 07                               | 13 2006                                                                                                                 |  |  |  |  |  |  |  |  |
|     |                                                                                                         | State Zip Code<br>CT 06824                               |     |               | Amount of Eac                    | ch Disbursement this Period                                                                                             |  |  |  |  |  |  |  |  |
|     | Purpose of Disbursement                                                                                 |                                                          |     |               |                                  | 5000.00                                                                                                                 |  |  |  |  |  |  |  |  |
|     | PAC contribution Candidate Name                                                                         |                                                          |     | 11            |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | Christopher Shays                                                                                       |                                                          |     | egory/<br>ype |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | Office Sought: X House Disburse                                                                         | ment For: 2006<br>Primary X General                      |     |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | President                                                                                               | Other (specify)                                          |     |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | State: CT District: 04                                                                                  |                                                          |     |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
| в.  | Full Name (Last, First, Middle Initial)<br>Friends of Clay Shaw                                         |                                                          |     |               | Transaction II<br>Date of Disbur | <b>D:</b> 1153832437030<br>sement                                                                                       |  |  |  |  |  |  |  |  |
|     | Mailing Address 2600 NE 14th Street Cau                                                                 | SOMOV                                                    |     |               | 07 <sup>M</sup> /                | 13 <sup>/</sup> 2006 <sup>×</sup>                                                                                       |  |  |  |  |  |  |  |  |
|     |                                                                                                         | •                                                        |     |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
|     |                                                                                                         | State Zip Code<br>FL 33062                               |     |               | Amount of Ead                    | h Disbursement this Period                                                                                              |  |  |  |  |  |  |  |  |
|     | Purpose of Disbursement                                                                                 |                                                          |     |               | 2500.00                          |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | PAC COntribution<br>Candidate Name<br>E. Clay Shaw, Jr.                                                 |                                                          | Cat | egory/        |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | Senate X<br>President                                                                                   | ment For: 2006<br>Primary General<br>Other (specify) ▼   | `   |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | State: FL District: 22                                                                                  |                                                          |     |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
| C.  | Full Name (Last, First, Middle Initial)<br>Friends of Clay Shaw                                         |                                                          |     |               | Transaction II<br>Date of Disbur |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | Mailing Address 2600 NE 14th Street Cau                                                                 | seway                                                    |     |               | 07                               | 13 <sup>′</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> |  |  |  |  |  |  |  |  |
|     |                                                                                                         | State Zip Code<br>FL 33062                               |     |               | Amount of Eac                    | ch Disbursement this Period                                                                                             |  |  |  |  |  |  |  |  |
|     | Purpose of Disbursement<br>PAC Contribution                                                             | 55002                                                    |     |               |                                  | 5000.00                                                                                                                 |  |  |  |  |  |  |  |  |
|     | Candidate Name<br>E. Clay Shaw, Jr.                                                                     |                                                          | Cat | egory/<br>ype |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
|     | Office Sought: X House Disburse<br>Senate President<br>State: FL District: 22                           | ment For: 2006<br>Primary X General<br>Other (specify) ▼ | `   |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
| Г   |                                                                                                         |                                                          |     |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
| s   | UBTOTAL of Disbursements This Page (optional) .                                                         |                                                          |     |               |                                  | 12500.00                                                                                                                |  |  |  |  |  |  |  |  |
| Т   | OTAL This Period (last page this line number only)                                                      |                                                          |     | . 🕨           |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |
| FEC | Schedule B (Form 3X) Rev. 02/2003                                                                       |                                                          | -   |               |                                  |                                                                                                                         |  |  |  |  |  |  |  |  |

| S            | CHEDULE B (FEC Form 3X)                                                                                                         | Use seperate schedule(s) FOR LINE NUME |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
|--------------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------------|---|-------------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-------|------|---------|-------|-------|-----------------|-----|--|
| IT           | EMIZED DISBURSEMENTS                                                                                                            | for each ca                            | ategory of the<br>ummary Page |   | ((                                                    | check c<br>21b |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | X    | 23    | Γ    | 24      |       | 25    |                 | 26  |  |
|              |                                                                                                                                 | <u> </u>                               |                               |   |                                                       | 27             | Ĺ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 28a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |      | 28b   |      | 28c     | Ļ     | 29    |                 | 30b |  |
|              | Information copied from such Reports and States<br>or commercial purposes, other than using the name<br>of commercial purposes. |                                        |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       | S               |     |  |
| $\square$    | NAME OF COMMITTEE (In Full)                                                                                                     |                                        |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
| $\mathbb{Z}$ | Help America's Leaders Political Action C                                                                                       | ommittee (H                            | ALPAC)                        |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
| Α.           | Full Name (Last, First, Middle Initial)<br>Gus Bilirakis for Congress                                                           |                                        |                               |   | Transaction ID: 1153832363219<br>Date of Disbursement |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
|              | Mailing Address 610 S Boulevard                                                                                                 |                                        |                               |   |                                                       |                | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | $\begin{array}{c} \begin{array}{c} M \\ 0 \\ 7 \\ \end{array} \end{array} \begin{array}{c} \prime \\ \end{array} \begin{array}{c} D \\ 1 \\ 3 \\ \end{array} \begin{array}{c} J \\ \end{array} \begin{array}{c} V \\ \end{array} \begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 6 \\ \end{array} \begin{array}{c} Y \\ 0 \\ \end{array} \begin{array}{c} Y \\ 0 \\ 0 \\ \end{array} \begin{array}{c} Y \\ Y \\ \end{array} \begin{array}{c} Y \\ Y \\ \end{array} \begin{array}{c} Y \\ Y $ |      |       |      |         |       |       |                 |     |  |
|              | <br>City<br>Tampa                                                                                                               |                                        | Zip Code<br>33606             |   |                                                       |                | Amount of Each Disbursement this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
|              | Purpose of Disbursement<br>PAC Contribution                                                                                     | 11                                     |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 2    | 2000. | 00   |         |       |       |                 |     |  |
|              | Candidate Name<br>Gus Michael Bilirakis                                                                                         |                                        |                               |   |                                                       | gory/<br>pe    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
|              | 5 <u>X</u>                                                                                                                      | ement For:<br>Primary<br>Other (speci  | 2006<br>General<br>fy) ▼      |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
|              | Full Name (Last, First, Middle Initial)                                                                                         |                                        |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |      |       |      | 1 500   |       | 0075  |                 |     |  |
| В.           | Johnson for Congress Committee                                                                                                  |                                        |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |       | rser | D /     |       |       | Y               |     |  |
|              | Mailing Address P.O. Box 1986                                                                                                   |                                        |                               |   |                                                       |                | $\begin{array}{c c} & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & & \\ & & & \\ & & & & \\ & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ &$ |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         | 3     |       |                 |     |  |
|              | City<br>New Britain                                                                                                             | State Zip Code<br>CT 06050             |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | nt o | fEad  | ch C | Disburs | 0     |       |                 | 7   |  |
|              | Purpose of Disbursement<br>PAC Contribution                                                                                     |                                        |                               | 0 | 11                                                    |                | L.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         | 5000. | 00    |                 |     |  |
|              | Candidate Name<br>Nancy L. Johnson                                                                                              |                                        | gory/<br>pe                   |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
|              | Office Sought: X House Disburs<br>Senate President                                                                              | ement For:<br>Primary<br>Other (speci  | 2006<br>X General<br>fy) ▼    |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
|              | State: CT District: 05                                                                                                          |                                        |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
| C.           | Full Name (Last, First, Middle Initial)<br>Jon Porter for Congress                                                              |                                        |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | of D | isbuı | rser |         |       | 8212  |                 |     |  |
|              | Mailing Address PO Box 26087                                                                                                    |                                        |                               |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 0 <sup>™</sup> 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | м    | /     | °1;  | 3       | Ý Ý   | 0 ò e | \$ <sup>×</sup> |     |  |
|              | City<br>Las Vegas                                                                                                               |                                        | Zip Code<br>89126             |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Amou                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | nt o | fEad  | ch D | Disburs | -     | -     |                 | _   |  |
|              | Purpose of Disbursement<br>PAC contribution                                                                                     |                                        |                               |   | 0                                                     | 11             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | L.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |       |      |         |       | 3000. | 00              |     |  |
|              | Candidate Name<br>Jon Porter Sr.                                                                                                |                                        |                               |   |                                                       | gory/<br>pe    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
|              |                                                                                                                                 | ement For:<br>Primary<br>Other (speci  | 2006<br>General<br>fy) ▼      |   |                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |
| s            | JBTOTAL of Disbursements This Page (optional)                                                                                   |                                        |                               |   |                                                       | •              | <br>•                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         | 10    | 000.0 | 00              | 7   |  |
|              | <b>DTAL</b> This Period (last page this line number only                                                                        |                                        |                               |   |                                                       |                | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |       |      |         |       |       |                 |     |  |

|                                                                                                                                                                                                                                                                                     | CHEDULE B (FEC Form 3X<br>EMIZED DISBURSEMENTS                                            | <b>S</b> I be seperation of the sep | ate schedule(s)<br>ategory of the<br>ummary Page | FOR LINE<br>(check onl<br>21b<br>27 | NUMBER:<br>y one)     PAGE     23 / 23       22     X     23     24     25     26       28a     28b     28c     29     30b |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--|--|
| Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating 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)<br>Help America's Leaders Political Action Committee (HALPAC) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                  |                                     |                                                                                                                            |  |  |
| Α.                                                                                                                                                                                                                                                                                  |                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                  |                                     | Transaction ID: 1153832299814<br>Date of Disbursement<br>0 7 <sup>M</sup> / <sup>D</sup> 1 3 / <sup>Y</sup> 2 0 0 6        |  |  |
|                                                                                                                                                                                                                                                                                     | Mailing Address 201 S. Orange Str<br>Suite 300                                            | State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Zip Code                                         |                                     | Amount of Each Disbursement this Period                                                                                    |  |  |
|                                                                                                                                                                                                                                                                                     | Orlando<br>Purpose of Disbursement<br>PAC Contribution                                    | FL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 32801                                            | 011                                 | 2000.00                                                                                                                    |  |  |
|                                                                                                                                                                                                                                                                                     | Candidate Name<br>Richard Keller                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                  | Category/<br>Type                   |                                                                                                                            |  |  |
|                                                                                                                                                                                                                                                                                     | Office Sought: X House I<br>Senate President<br>State: FL District: 08                    | Disbursement For:<br>X Primary<br>Other (speci                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2006<br>General<br>ify) 🔻                        |                                     |                                                                                                                            |  |  |

| SUBTOTAL of Disbursements This Page (optional)      | • | 2000.00  |  |  |  |
|-----------------------------------------------------|---|----------|--|--|--|
| TOTAL This Period (last page this line number only) | ► | 24500.00 |  |  |  |
| FEC Schedule B (Form 3X) Rev. 02/2003               |   |          |  |  |  |