

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 2000 Purchase St.  
 Check if different than previously reported. (ACC)  
Purchase NY 10577

2. **FEC IDENTIFICATION NUMBER** C00410274  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIPCODE

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 02 01 2010 through 02 28 2010

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 Christine Maiolo  
Signature of Treasurer Electronically Filed by Christine Maiolo Date 03 18 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

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

Write or Type Committee Name  
MasterCard International Inc. Employees' PAC

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		81932.47
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	90997.42									
(c) Total Receipts (from Line 19) .....	28422.50	37532.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	119419.92	119464.47								
7. Total Disbursements (from Line 31) .....	668.64	713.19								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	118751.28	118751.28								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	26345.00	31420.00
(ii) Unitemized .....	2077.50	6112.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	28422.50	37532.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	28422.50	37532.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	28422.50	37532.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	28422.50	37532.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	34.65	79.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	34.65	79.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	633.99	633.99
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	668.64	713.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	668.64	713.19

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	28422.50	37532.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28422.50	37532.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	34.65	79.20
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	34.65	79.20

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial) Ajay Banga		Date of Receipt MM / DD / YYYY 02 / 25 / 2010
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 3119E37825BCFC8A9EA
City Purchase	State NY	
Zip Code 10577-2405		Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		
Name of Employer MasterCard	Occupation President and Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**B.**

Full Name (Last, First, Middle Initial) Hannah Berkowitz		Date of Receipt MM / DD / YYYY 02 / 15 / 2010
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20100210-74-12-5
City Purchase	State NY	
Zip Code 10577-2405		Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C		
Name of Employer MasterCard	Occupation Group Executive, Senior Associate Gene	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Jim Carrington		Date of Receipt MM / DD / YYYY 02 / 28 / 2010
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> B7DDB253F83E5C4D1B6
City Purchase	State NY	
Zip Code 10577-2405		Amount of Each Receipt this Period 291.00
FEC ID number of contributing federal political committee. C		
Name of Employer MasterCard	Occupation Global Product Group Executive, Global	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 582.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5416.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrew Cheskis		Date of Receipt MM / DD / YYYY 02 / 15 / 2010	
	Mailing Address 100 Manhattanville Road		<b>Transaction ID:</b> 20100210-17-12-5	
	City	State	Zip Code	Amount of Each Receipt this Period
	Purchase	NY	10577-2134	350.00
	FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MasterCard		Occupation SVP/General Auditor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Heidi Davidson		Date of Receipt MM / DD / YYYY 02 / 15 / 2010	
	Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20100210-34-12-5	
	City	State	Zip Code	Amount of Each Receipt this Period
	Purchase	NY	10577-2405	350.00
	FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MasterCard		Occupation VP/Director State Govt Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Colm Dobbyn		Date of Receipt MM / DD / YYYY 02 / 15 / 2010	
	Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20100210-22-12-5	
	City	State	Zip Code	Amount of Each Receipt this Period
	Purchase	NY	10577-2405	125.00
	FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MasterCard		Occupation SVP/Asst. General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	825.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 19  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lawrence Flanagan

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Marketing Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt 02 / 15 / 2010  
**Transaction ID:** 20100210-26-12-5  
 Amount of Each Receipt this Period 416.00

**B.**

Full Name (Last, First, Middle Initial)  
Tucker Foote

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 21 / 2010  
**Transaction ID:** D7D2462F21E0E32A64A  
 Amount of Each Receipt this Period 125.00

**C.**

Full Name (Last, First, Middle Initial)  
John Gallagher

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt 02 / 15 / 2010  
**Transaction ID:** 20100210-50-12-5  
 Amount of Each Receipt this Period 124.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **665.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)  
Dora Hanft

Mailing Address 670 W End Ave

City State Zip Code  
New York NY 10025-7313

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

Name of Employer Occupation  
Spouse of Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  
MM / DD / YYYY  
02 / 21 / 2010

**Transaction ID:** 0BC08C7F3B47A996C56

Amount of Each Receipt this Period  
208.00

**B.**

Full Name (Last, First, Middle Initial)  
Noah Hanft

Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577-2405

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

Name of Employer Occupation  
MasterCard General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
832.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2010

**Transaction ID:** 20100210-14-12-5

Amount of Each Receipt this Period  
416.00

**C.**

Full Name (Last, First, Middle Initial)  
Justin Howe

Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577-2405

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

Name of Employer Occupation  
MasterCard Finance Leader, Financial Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
334.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2010

**Transaction ID:** 20100210-54-12-5

Amount of Each Receipt this Period  
167.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **791.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.** Full Name (Last, First, Middle Initial)  
James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code  
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Group Head, Engineering Srvcs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt: MM / DD / YYYY  
02 / 15 / 2010

Transaction ID: 20100210-30-12-5

Amount of Each Receipt this Period: 124.00

**B.** Full Name (Last, First, Middle Initial)  
Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City State Zip Code  
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Enhancement Stratg

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt: MM / DD / YYYY  
02 / 15 / 2010

Transaction ID: 20100210-3-12-5

Amount of Each Receipt this Period: 290.00

**C.** Full Name (Last, First, Middle Initial)  
Laura Kreps

Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577-2405

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

Name of Employer MasterCard Occupation Principal Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY  
02 / 22 / 2010

Transaction ID: DE5F901C0A9F66E27A1

Amount of Each Receipt this Period: 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 714.00

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

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

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

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Pamela Leach		Date of Receipt
	Mailing Address 2200 Mastercard Boulevard		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 5 / 2 0 1 0
	City	State	Zip Code
	O Fallon	MO	63368-7263
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100210-2-12-5
Name of Employer MasterCard		Occupation SVP/Member Services	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.00	145.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Manchisi		Date of Receipt
	Mailing Address 2200 Mastercard Boulevard		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 5 / 2 0 1 0
	City	State	Zip Code
	O Fallon	MO	63368-7263
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100210-18-12-5
Name of Employer MasterCard		Occupation SVP/Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 832.00	416.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Chris McWilton		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 5 / 2 0 1 0
	City	State	Zip Code
	Purchase	NY	10577-2405
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100210-49-12-5
Name of Employer MasterCard		Occupation Chief Financial Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 832.00	416.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>977.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 13 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.** Full Name (Last, First, Middle Initial)  
Catherine Murchie  
 Mailing Address 2200 Mastercard Boulevard  
 City State Zip Code  
 O Fallon MO 63368-7263  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 1 7 / 2 0 1 0  
**Transaction ID:** 042ADDA1265A187DB38  
 Amount of Each Receipt this Period  
 2400.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MasterCard VP/Organizational Development  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Marion M. Murphy  
 Mailing Address 49 Cross Ln  
 City State Zip Code  
 Cos Cob CT 06807-2615  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 1 9 / 2 0 1 0  
**Transaction ID:** 3ABE164FEA139E27230  
 Amount of Each Receipt this Period  
 1500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Spouse of Employee  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1500.00

**C.** Full Name (Last, First, Middle Initial)  
Timothy Murphy  
 Mailing Address 2000 Purchase Street  
 City State Zip Code  
 Purchase NY 10577-2405  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 1 5 / 2 0 1 0  
**Transaction ID:** 20100210-35-12-5  
 Amount of Each Receipt this Period  
 416.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MasterCard Associate General Counsel  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 832.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4316.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 14 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.** Full Name (Last, First, Middle Initial)  
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code  
Miami FL 33131-2951

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

Name of Employer MasterCard Occupation SVP/Senior Financial Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt: 02 / 15 / 2010  
Transaction ID: 20100210-53-12-5  
Amount of Each Receipt this Period: 124.00

**B.** Full Name (Last, First, Middle Initial)  
Patrick O'Sullivan

Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt: 02 / 15 / 2010  
Transaction ID: 20100210-16-12-5  
Amount of Each Receipt this Period: 124.00

**C.** Full Name (Last, First, Middle Initial)  
Joshua Peirez

Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577-2405

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

Name of Employer MasterCard Occupation SVP/Associate General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 17 / 2010  
Transaction ID: DC674D0A1065D49E20E  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 748.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 19  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 02 / 15 / 2010
Mailing Address 2200 Mastercard Boulevard		<b>Transaction ID:</b> 20100210-10-12-5
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 110.00
Name of Employer MasterCard	Occupation VP/Information Tech	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

**B.**

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 02 / 15 / 2010
Mailing Address 2200 Mastercard Boulevard		<b>Transaction ID:</b> 20100210-9-12-5
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 416.00
Name of Employer MasterCard	Occupation SVP/Systems Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 832.00	

**C.**

Full Name (Last, First, Middle Initial) Bob Selander		Date of Receipt MM / DD / YYYY 02 / 11 / 2010
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 16C23B2D500A8184E9A
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer MasterCard	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5526.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 19

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)  
Nancy Selander

Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577

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

Name of Employer Occupation  
Spouse of Employee

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: B82A075E6EDBAD53169

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City State Zip Code  
O Fallon MO 63368-7263

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

Name of Employer Occupation  
MasterCard VP/Systems Support

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 248.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 1 0

Transaction ID: 20100210-32-12-5

Amount of Each Receipt this Period

124.00

**C.**

Full Name (Last, First, Middle Initial)  
Patricia Smith-Thurman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code  
O Fallon MO 63368-7263

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

Name of Employer Occupation  
MasterCard Group Head, Info Technology

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 1 0

Transaction ID: 20100210-7-12-5

Amount of Each Receipt this Period

300.00

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

5424.00

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

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

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

FOR LINE NUMBER: PAGE 17 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.** Full Name (Last, First, Middle Initial)  
Joseph Swezey  
Mailing Address 2000 Purchase Street  
City Purchase State NY Zip Code 10577-2405  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation VP/Financial Analysis  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 248.00  
Date of Receipt 02 / 15 / 2010  
Transaction ID: 20100210-37-12-5  
Amount of Each Receipt this Period 124.00

**B.** Full Name (Last, First, Middle Initial)  
Donna Terman  
Mailing Address 2000 Purchase Street  
City Purchase State NY Zip Code 10577-2405  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation VP/Bus Resources-Communication  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 02 / 15 / 2010  
Transaction ID: 20100210-33-12-5  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Frank Tufano  
Mailing Address 2000 Purchase Street  
City Purchase State NY Zip Code 10577-2405  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MasterCard Occupation Group Head Finance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 580.00  
Date of Receipt 02 / 15 / 2010  
Transaction ID: 20100210-59-12-5  
Amount of Each Receipt this Period 290.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 564.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 19  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jeroen Van Erven

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	0

**Transaction ID:** 20100210-41-12-5

Amount of Each Receipt this Period  
125.00

**B.**

Full Name (Last, First, Middle Initial)  
Mimi Wood

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	0

**Transaction ID:** 20100210-44-12-5

Amount of Each Receipt this Period  
124.00

**C.**

Full Name (Last, First, Middle Initial)  
Kent Young

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Business Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	0

**Transaction ID:** 20100210-43-12-5

Amount of Each Receipt this Period  
130.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>379.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>26345.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 19

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

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)  
Accounting Reconciliation Entry

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577

Purpose of Disbursement  
Reconcile cash-on-hand to bank account balance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: VAFE9B13FCDEA9758845

Date of Disbursement

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

Amount of Each Disbursement this Period

633.99
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SUBTOTAL of Disbursements This Page (optional) ..... ▶

633.99
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TOTAL This Period (last page this line number only) ..... ▶

633.99
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