

**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

TO ORGANIZE A MAJORITY PAC (TOMPAC)

ADDRESS (number and street)

PO BOX 752

☐Check if different  
than previously  
reported. (ACC)

DES MOINES

IA

50303

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIPCODE ▲

C00385732

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

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

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

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2006

through

09

30

2006

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

Type or Print Name of Treasurer

Theresa Kehoe

Signature of Treasurer

Electronically Filed by Theresa Kehoe

Date

10

12

2006

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2006	67488.62
(b) Cash on Hand at Beginning of Reporting Period .....	46909.59	
(c) Total Receipts (from Line 19) .....	51137.00	112857.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	98046.59	180345.62
7. Total Disbursements (from Line 31) .....	83956.34	166255.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	14090.25	14090.25
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

TO ORGANIZE A MAJORITY PAC (TOMPAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	42600.00	87620.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1537.00	2237.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	44137.00	89857.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	7000.00	23000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	51137.00	112857.00
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)) .....	51137.00	112857.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	51137.00	112857.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		21943.89	38112.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡		21943.89	38112.30
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		62000.00	113500.00
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	9500.00
(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	9500.00
29. Other Disbursements.....		12.45	5143.07
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))..		83956.34	166255.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		83956.34	166255.37

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	51137.00	112857.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	9500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	51137.00	103357.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21943.89	38112.30
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	21943.89	38112.30

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Syed Bokhari Mailing Address 501 Chaumont Dr City Villanova State PA Zip Code 19085 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Parkway Clinical Labs Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11643 Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Jerry Brown Mailing Address 7622 N Sunset Dr City Saint Louis State MO Zip Code 63121 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Korein Tillery Occupation Investigator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11646 Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) G David Bunning Mailing Address 825 South Waukegan Road A8 #175 City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Money Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11651 Amount of Each Receipt this Period 1800.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			7800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

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

Use separate schedule(s)  
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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Denise Bunning Mailing Address 825 South Waukegan Road A8 #175 City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11650 Amount of Each Receipt this Period 1800.00
Name of Employer None Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00			
<b>B.</b> Full Name (Last, First, Middle Initial) G Nicholas Cavarocchi Mailing Address Cavarocchi, Rusio and Dennis 316 Pennsylvania Avenue SE #403 City Washington State DC Zip Code 20003 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11652 Amount of Each Receipt this Period 1500.00
Name of Employer Cavarocchi et al Occupation Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00			
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Chlapaty Mailing Address 4640 Trueman Blvd City Hilliard State OH Zip Code 43026 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11644 Amount of Each Receipt this Period 5000.00
Name of Employer Advanced Drainage Systems Occupation President 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) ..... ▶			8300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) B Lyle Dennis			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 11515 Noahs Landing Court			<b>Transaction ID:</b> SA11A1.11640	
City State Zip Code Manassas VA 20112			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer CRD Associates		Occupation Gov't Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) J Michael Galligan			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6	
Mailing Address 2425 Jordan Trail			<b>Transaction ID:</b> SA11A1.11628	
City State Zip Code West Des Moines IA 50265			Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Galligan Law Firm		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Domenic Ruscio			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 6100 Westchester Drive #1012			<b>Transaction ID:</b> SA11A1.11641	
City State Zip Code College Park MD 20740			Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer CRD Associates		Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			7500.00	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶				



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

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Francis Smith Mailing Address 1230 N Westshore Blvd City Manteno State IL Zip Code 60950 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Illinois Diversatech Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 1 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11626 Amount of Each Receipt this Period 2500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Francis Smith Mailing Address 1230 N Westshore Blvd City Manteno State IL Zip Code 60950 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Illinois Diversatech Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 1 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11627 Amount of Each Receipt this Period 2500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Alexis Tillery Mailing Address 1000 Washington Ave Apt 623 City Saint Louis State MO Zip Code 63101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Korein Tillery Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11645 Amount of Each Receipt this Period 1000.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 27

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

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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Katherine Tillery Mailing Address 34 Country Club Pl City State Zip Code Belleville IL 62223 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11647 Amount of Each Receipt this Period 2000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Stephen Tillery Mailing Address 701 Market St Ste 300 City State Zip Code Saint Louis MO 63101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Korein Tillery Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11648 Amount of Each Receipt this Period 2000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Sac & Fox Tribe Mailing Address of the Mississippi in Iowa 349 Meskwaki Road City State Zip Code Tama IA 52339 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Info Requested Occupation Info Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.11642 Amount of Each Receipt this Period 5000.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		9000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) A George Zelcs		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 701 Market St #300		<b>Transaction ID:</b> SA11A1.11649	
City Saint Louis	State MO	Zip Code 63101	Amount of Each Receipt this Period 4000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Korein Tillery LLC	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00		

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

4000.00

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

42600.00

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
 TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Delta-PAC			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address PO Box 20706			<b>Transaction ID:</b> SA11C.11654	
City Atlanta		State GA	Zip Code 30320	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Sonnenschein Carlin Nath & Rosenthal PAC			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 7 / 2 0 0 6	
Mailing Address 1301 K St NW Ste 600			<b>Transaction ID:</b> SA11C.11653	
City Washington		State DC	Zip Code 20005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

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

7000.00

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

7000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

**A.** Carroll Travel

Mailing Address 201 Mass Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
travel expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.11691

Date of Disbursement

/   /

Amount of Each Disbursement this Period

332.53

Full Name (Last, First, Middle Initial)

**B.** Carroll Travel

Mailing Address 201 Mass Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
travel expenses airfare, amtrak for TOMPA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** SB21B.11544

Date of Disbursement

/   /

Amount of Each Disbursement this Period

484.80

Full Name (Last, First, Middle Initial)

**C.** Carroll Travel

Mailing Address 201 Mass Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
travel expenses airfare for TOMPAC

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** SB21B.11555

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1142.50

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

1959.83

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 27

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

**A.** Carroll Travel

Mailing Address 201 Mass Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
travel expenses airfare for TOMPAC

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** SB21B.11594

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

609.40

Full Name (Last, First, Middle Initial)

**B.** DiNino Associates LLC

Mailing Address 210 Whitestone Road

City Silver Spring State MD Zip Code 20901

Purpose of Disbursement  
fundraising retainer for TOMPAC

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** SB21B.11535

Date of Disbursement

07 / 02 / 2006

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C.** DiNino Associates LLC

Mailing Address 210 Whitestone Road

City Silver Spring State MD Zip Code 20901

Purpose of Disbursement  
consulting fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** SB21B.11537

Date of Disbursement

07 / 23 / 2006

Amount of Each Disbursement this Period

4000.00

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

8609.40

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 27

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) DiNino Associates LLC		<b>Transaction ID:</b> SB21B.11543 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>2</td><td>7</td><td></td> <td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	7		2	0	0	6													
Mailing Address 210 Whitestone Road		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>4000.00</td> </tr> </table>	4000.00																			
4000.00																						
City Silver Spring State MD Zip Code 20901																						
Purpose of Disbursement consulting fundraising for TOMPAC																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Jeremy Gold		<b>Transaction ID:</b> SB21B.11536 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td> <td>0</td><td>2</td><td></td> <td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		0	2		2	0	0	6													
Mailing Address 2801 Quebec St NW #444		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>258.57</td> </tr> </table>	258.57																			
258.57																						
City Washington State DC Zip Code 20008																						
Purpose of Disbursement travel exp, postage fundraising for TOMP																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Jeremy Gold		<b>Transaction ID:</b> SB21B.11538 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>0</td><td>1</td><td></td> <td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	1		2	0	0	6													
Mailing Address 2801 Quebec St NW #444		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>116.00</td> </tr> </table>	116.00																			
116.00																						
City Washington State DC Zip Code 20008																						
Purpose of Disbursement travel expenses for fundraising for TOM																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

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

4374.57

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Jeremy Gold		<b>Transaction ID:</b> SB21B.11548 <b>Date of Disbursement</b> <div> <div>09</div> <div>03</div> <div>2006</div> </div>	
Mailing Address 2801 Quebec St NW #444		<b>Amount of Each Disbursement this Period</b> <div>87.00</div>	
City Washington State DC Zip Code 20008	Purpose of Disbursement travel expenses for fundraising for TOM	<input type="text"/>	<b>Category/Type</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) <b>B.</b> Jeremy Gold		<b>Transaction ID:</b> SB21B.11567 <b>Date of Disbursement</b> <div> <div>09</div> <div>25</div> <div>2006</div> </div>	
Mailing Address 2801 Quebec St NW #444		<b>Amount of Each Disbursement this Period</b> <div>533.30</div>	
City Washington State DC Zip Code 20008	Purpose of Disbursement travel expenses for fundraising for TOM	<input type="text"/>	<b>Category/Type</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) <b>C.</b> Periwinkle Inn		<b>Transaction ID:</b> SB21B.11693 <b>Date of Disbursement</b> <div> <div>07</div> <div>04</div> <div>2006</div> </div>	
Mailing Address PO Box 1816		<b>Amount of Each Disbursement this Period</b> <div>279.73</div>	
City Nantucket State MA Zip Code 02554	Purpose of Disbursement travel expenses for TOMPAC	<input type="text"/>	<b>Category/Type</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**900.03**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Science Center of Iowa		<b>Transaction ID:</b> SB21B.11552 <b>Date of Disbursement</b> <div> <div>09</div> <div>07</div> <div>2006</div> </div>
Mailing Address 401 W MLK Parkway		<b>Amount of Each Disbursement this Period</b> <div>540.00</div>
City Des Moines State IA Zip Code 50309		
Purpose of Disbursement catering for fundraiser for TOMPAC		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Science Center of Iowa		<b>Transaction ID:</b> SB21B.11593 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2006</div> </div>
Mailing Address 401 W MLK Parkway		<b>Amount of Each Disbursement this Period</b> <div>780.00</div>
City Des Moines State IA Zip Code 50309		
Purpose of Disbursement catering for fundraiser for TOMPAC		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Sharon Haselhoff		<b>Transaction ID:</b> SB21B.11595 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2006</div> </div>
Mailing Address 1508 42nd St		<b>Amount of Each Disbursement this Period</b> <div>2500.00</div>
City Des Moines State IA Zip Code 50311		
Purpose of Disbursement fundraising consulting fee for TOMPAC		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**3820.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

**A.** Spencer's Seattle

Mailing Address 17620 Pacific Highway So.

City State Zip Code  
Seattle WA 98188

Purpose of Disbursement  
catering for TOMPAC fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** SB21B.11563

Date of Disbursement

/   /

Amount of Each Disbursement this Period

210.26

Full Name (Last, First, Middle Initial)

**B.** Theresa Kehoe

Mailing Address 1314 42nd Street

City State Zip Code  
Des Moines IA 50311

Purpose of Disbursement  
contract services compliance for TOMPAC

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** SB21B.11542

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Theresa Kehoe

Mailing Address 1314 42nd Street

City State Zip Code  
Des Moines IA 50311

Purpose of Disbursement  
contract services compliance for TOMPAC

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** SB21B.11596

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1210.26

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A. Whotels Seattle</b> Full Name (Last, First, Middle Initial) Mailing Address 1112 4th Ave City Seattle State WA Zip Code 94109 Purpose of Disbursement hotel travel exp. for tompac Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.11566</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2006 Amount of Each Disbursement this Period 628.16
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	----------------------------------------------------------------------------------------------------------------------------------------------------------

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

628.16

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

21502.25

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

## **A. BOB CASEY FOR PENNSYLVANIA COMMITTEE**

Mailing Address PO BOX 1177

City HARRISBURG State PA Zip Code 17108

Purpose of Disbursement  
Contribution

Candidate Name  
ROBERT P JR CASEY

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.11675

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Boswell for Congress**

Mailing Address Box 6220

City Des Moines State IA Zip Code 50309

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.11676

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. Braley for Congress**

Mailing Address PO Box 390

City Waterloo State IA Zip Code 50704

Purpose of Disbursement  
contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.11677

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

2500.00

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

10000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A. Braley for Congress</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 390 City Waterloo State IA Zip Code 50704 Purpose of Disbursement contribution 2006 primary debt Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.11688</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 5000.00
<b>B. E. Joyce Schulte for Congress</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 367 City Creston State IA Zip Code 50801 Purpose of Disbursement Contribution Candidate Name E JOYCE SCHULTE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 05 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.11678</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00
<b>C. Friends of Sherrod Brown</b> Full Name (Last, First, Middle Initial) Mailing Address 2280 Kresge Dr Suite 800 City Amherst State OH Zip Code 44001 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.11696</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6 Amount of Each Disbursement this Period 5000.00
<b>SUBTOTAL of Disbursements This Page (optional)</b> ..... ▶		11000.00
<b>TOTAL This Period (last page this line number only)</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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Harold Ford Jr for Tennessee		<b>Transaction ID:</b> SB23.11679 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 6</div> </div>
Mailing Address 5120 Barry Road Suite 1300		<b>Amount of Each Disbursement this Period</b> <div>2500.00</div>
City Memphis State TN Zip Code 38117		
Purpose of Disbursement contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) James Webb for US Senate		<b>Transaction ID:</b> SB23.11680 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 6</div> </div>
Mailing Address 1916 Wilson Blvd, Suite 304		<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
City Arlington State VA Zip Code 22201		
Purpose of Disbursement contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) KLOBUCHAR FOR MINNESOTA		<b>Transaction ID:</b> SB23.11672 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 1 / 2 0 0 6</div> </div>
Mailing Address 1430 CONCORDIA AVENUE PO BOX 4146		<b>Amount of Each Disbursement this Period</b> <div>2000.00</div>
City SAINT PAUL State MN Zip Code 55104		
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**9500.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) <b>KLOBUCHAR FOR MINNESOTA</b>		<b>Transaction ID:</b> SB23.11674 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 6</div> </div>
Mailing Address 1430 CONCORDIA AVENUE PO BOX 4146		Amount of Each Disbursement this Period <div>5000.00</div>
City SAINT PAUL State MN Zip Code 55104	<div>Category/Type</div>	
Purpose of Disbursement contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Loeb sack for Congress</b>		<b>Transaction ID:</b> SB23.11681 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 6</div> </div>
Mailing Address 385 E College St		Amount of Each Disbursement this Period <div>1000.00</div>
City Iowa City State IA Zip Code 52240	<div>Category/Type</div>	
Purpose of Disbursement contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>McCaskill for Missouri</b>		<b>Transaction ID:</b> SB23.11673 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 1 / 2 0 0 6</div> </div>
Mailing Address PO Box 6771		Amount of Each Disbursement this Period <div>3000.00</div>
City St Louis State MO Zip Code 63144	<div>Category/Type</div>	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>9000.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

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

Use separate schedule(s)  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

<b>A. McCaskill for Missouri</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 6771 City St Louis State MO Zip Code 63144 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.11682</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 4000.00
<b>B. Menendez for Senate</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 848 City Union City State NJ Zip Code 07087 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.11683</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 5000.00
<b>C. Montanans for Tester</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 1135 City Helena State MT Zip Code 59624 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.11684</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 4000.00

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

13000.00

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



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

**A. Ned Lamont for Senate**

Mailing Address 300 Research Parkway

City Meriden State CT Zip Code 06450

Purpose of Disbursement  
contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.11685**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. SESTAK FOR CONGRESS**

Mailing Address P.O. Box 16

City Media State PA Zip Code 19063

Purpose of Disbursement  
contribution

Candidate Name  
JOSEPH A JR. SESTAK

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 7

**Transaction ID: SB23.11686**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Whitehouse for Senate**

Mailing Address 100 Midway PI #23

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.11697**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

7000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

**A.** Whitehouse for Senate

Mailing Address 100 Midway PI #23

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.11687

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

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

2500.00

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

62000.00

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

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<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)  
TO ORGANIZE A MAJORITY PAC (TOMPAC)

Full Name (Last, First, Middle Initial)

**A.** Bankers Trust

Mailing Address 7th & Grand

City State Zip Code  
Des Moines IA 50309

Purpose of Disbursement  
service charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** SB29.11698

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12.45

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

12.45

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

12.45