

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
All America PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		819652.36
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	819652.36									
(c) Total Receipts (from Line 19)	430977.35	430977.35								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1250629.71	1250629.71								
7. Total Disbursements (from Line 31)	283175.78	283175.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	967453.93	967453.93								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
All America PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	385100.18	385100.18
(i) Itemized (use Schedule A)	723.47	723.47
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	385823.65	385823.65
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	34500.00	34500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	420323.65	420323.65
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)	4607.56	4607.56
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6046.14	6046.14
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))	430977.35	430977.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	430977.35	430977.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	255925.78	255925.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	255925.78	255925.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20500.00	20500.00
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)	2500.00	2500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	2500.00	2500.00
29. Other Disbursements.....	4250.00	4250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	283175.78	283175.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	283175.78	283175.78

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	420323.65	420323.65
34. Total Contribution Refunds (from Line 28(d))	2500.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	417823.65	417823.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	255925.78	255925.78
37. Offsets to Operating Expenditures (from Line 15, page 3)	4607.56	4607.56
38. Net Operating Expenditures (subtract Line 37 from Line 36)	251318.22	251318.22

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Robert V. Alvarado		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address 41 Santa Catalina Drive		Transaction ID: C1532
City State Zip Code Rancho Palos Verde CA 90275	Amount of Each Receipt this Period 800.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Court Call	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) B. Cesar Alvarez		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2006
Mailing Address 1221 Brickell Avenue		Transaction ID: C1570
City State Zip Code Miami FL 33131	Amount of Each Receipt this Period 4200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Greenberg Traurig	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) C. Anne R. Avis		Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2006
Mailing Address 1545 Waverly Street		Transaction ID: C1510
City State Zip Code Palo Alto CA 94301	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Homemaker	
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) ▶	10000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 156						
	(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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Gregory M. Avis		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6	
Mailing Address 1545 Waverley Street		Transaction ID: C1509	
City State Zip Code Palo Alto CA 94301		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Summit Partners		Occupation Venture Capitalist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Emily M. Banks		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6	
Mailing Address P.O. Box 19		Transaction ID: C1565	
City State Zip Code Marshfield Hills MA 02051		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Cheryl N. Baxter		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6	
Mailing Address 1772 Ballejo Street		Transaction ID: C1540	
City State Zip Code San Francisco CA 94123		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Homemaker	
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) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Ralph H. Baxter		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 1772 Vallejo Street		Transaction ID: C1539
City State Zip Code San Francisco CA 94123	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Orrick Herrington Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Robert A. Beizer		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2006
Mailing Address 5406 Goldsboro Road		Transaction ID: C1557
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Gray Television Group General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Carolyn F. Belfer		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2006
Mailing Address 767 Fifth Avenue		Transaction ID: C1496
City State Zip Code New York NY 10153	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker		
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) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 156
	<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	

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
Laurence D. Belfer

Mailing Address 767 Fifth Avenue

City State Zip Code
New York NY 10153

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

Name of Employer
Belfer Management, LLC

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 31 / 2006

Transaction ID: C1497

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Stephen H. Bittel

Mailing Address 801 Arthur Godfrey Road
Suite 500

City State Zip Code
Miami Beach FL 33140

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

Name of Employer
Terranova

Occupation
Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2006

Transaction ID: C1571

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Edward Blank

Mailing Address 435 E 87th St

City State Zip Code
New York NY 10128

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

Name of Employer
Self-Employed

Occupation
Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 07 / 2006

Transaction ID: C1639

Amount of Each Receipt this Period
5000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 156
	<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	

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. David M. Brodsky		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 4 Burgess Road		Transaction ID: C1498
City State Zip Code Scarsdale Park NY 10583	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Latham & Watkins	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Lael A. Brodsky		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 5543 Waneta Drive		Transaction ID: C1515
City State Zip Code Dallas TX 75209	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Peter S. Brodsky		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 5543 Waneta Drive		Transaction ID: C1514
City State Zip Code Dallas TX 75209	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Hicks, Muse, Tate & Furst	Occupation Attorney	
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) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 156
	<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	

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
Kelly J. Bronfman

Mailing Address 30 Atherton Avenue

City Atherton State CA Zip Code 94027

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 08 / 2006

Transaction ID: C1627

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Samuel Bronfman, II

Mailing Address 30 Atherton Avenue

City Atherton State CA Zip Code 94027

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

Name of Employer Occupation
Self-Employed Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 08 / 2006

Transaction ID: C1663

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Jonathan C. Bunge

Mailing Address 382 Ridge Avenue

City Winnetka State IL Zip Code 60093

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

Name of Employer Occupation
Kirkland & Ellis Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2006

Transaction ID: C1541

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	10500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Mark Chandler		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 528 Tennyson Avenue		Transaction ID: C1512
City State Zip Code Palo Alto CA 94301	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Cisco Systems	Occupation General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Chris Christensen		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 7030 Masonvells		Transaction ID: C1625
City State Zip Code Dallas TX 75230	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Pierson Patterson	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. John C. Corrigan		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address 4934 S. Cornell Unit J		Transaction ID: C1542
City State Zip Code Chicago IL 60615	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Dykema Gossett	Occupation Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Phoebe Crane		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6	
Mailing Address 1585 North US 421		Transaction ID: C1517	
City Whitestown	State IN	Zip Code 46075	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation Homemaker	Aggregate Year-to-Date ▼ 5000.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Steven C. Crane		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6	
Mailing Address 1585 North US 421		Transaction ID: C1516	
City Whitestown	State IN	Zip Code 46075	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation Chairman & CEO	Aggregate Year-to-Date ▼ 5000.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Scott M. Delman		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address 54 Thompson Street		Transaction ID: C1503	
City New York	State NY	Zip Code 10012	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation President	Aggregate Year-to-Date ▼ 5000.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Britt K. Dougall		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006
Mailing Address 378 Mississippi River Boulevard No		Transaction ID: C1519
City State Zip Code Saint Paul MN 55104	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Christopher R. Dougall		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006
Mailing Address 378 Mississippi River Boulevard No		Transaction ID: C1518
City State Zip Code Saint Paul MN 55104	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Portfolio Manager Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Denise M. Dupre		Date of Receipt M M / D D / Y Y Y Y 03 / 08 / 2006
Mailing Address 61 Farm Street		Transaction ID: C1566
City State Zip Code Dover MA 02030	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Professor Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 156
	<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

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial) Kevin Evanich		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 200 E. Randolph, 56th Floor		Transaction ID: C1543
City State Zip Code Chicago IL 60601	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Kirkland & Ellis	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) R. Scott Falk		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 370 Sheridan Road		Transaction ID: C1544
City State Zip Code Winnetka IL 60093	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Kirkland & Ellis	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Harold Fetner		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006
Mailing Address 115 Westwood Drive		Transaction ID: C1528
City State Zip Code Mount Kisco NY 10549	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Sidney Fetner & Associates	Occupation President	
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) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Nina Fetner		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006	
Mailing Address 115 Westwood Drive		Transaction ID: C1529	
City State Zip Code Mount Kisco NY 10549		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Bruce W. Fleming		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 1616 Shakespeare Street		Transaction ID: C1572	
City State Zip Code Baltimore MD 21231		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Canusa Corporation Paper Broker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Claude G.B. Fontheim		Date of Receipt M M / D D / Y Y Y Y 02 / 16 / 2006	
Mailing Address 3054 Davenport Street, NW		Transaction ID: C1505	
City State Zip Code Washington DC 20008		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Fontheim International President & CEO			
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) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Jonathan Foster		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006
Mailing Address 940 Park Avenue Apt. 6B		Transaction ID: C1613 Amount of Each Receipt this Period 2000.00
City State Zip Code New York NY 10028	FEC ID number of contributing federal political committee. C	
Name of Employer The Cypress Group	Occupation Managing Director	Amount of Each Receipt this Period 2000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Dana Gelb		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2006
Mailing Address 100 Copa de Oro		Transaction ID: C1638 Amount of Each Receipt this Period 5000.00
City State Zip Code Los Angeles CA 90077	FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation Homemaker	Amount of Each Receipt this Period 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Gardner F. Gillespie		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2006
Mailing Address 2414 Ridge Road Drive		Transaction ID: C1555 Amount of Each Receipt this Period 5000.00
City State Zip Code Alexandria VA 22302	FEC ID number of contributing federal political committee. C	
Name of Employer Hogan & Hartson	Occupation Attorney	Amount of Each Receipt this Period 5000.00
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) ▶	12000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Roger S. Goldman		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address 5404 Trent Street		Transaction ID: C1626	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Latham & Watkins	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. Richard S Goldstein		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address 6814 Tommy Ct		Transaction ID: C1629	
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Nixon Peabody LLP	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Michael J. Granoff		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address 59 Bliss Avenue		Transaction ID: C1610	
City State Zip Code Tenafly NJ 07670	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Maniv Energy Capital, LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	9500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 156
	<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	

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Bradford I. Hearsh		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2006
Mailing Address 120 E. 62 Street No. 5C		Transaction ID: C1562
City State Zip Code New York NY 10021		Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		
Name of Employer UBS Warburg	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Malcolm Heinicke		Date of Receipt M M / D D / Y Y Y Y 02 / 23 / 2006
Mailing Address 1738 14th Avenue		Transaction ID: C1577
City State Zip Code San Francisco CA 94122		Amount of Each Receipt this Period 245.90
FEC ID number of contributing federal political committee. C		
Name of Employer Munger Tolles & Olson	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.90	* In-Kind: Travel & Catering

Full Name (Last, First, Middle Initial) C. Robert S. Held		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 3142 Redwood Court		Transaction ID: C1545
City State Zip Code Flossmoor IL 60422		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Kirkland & Ellis	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	5745.90
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Jeremy Henderson		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006
Mailing Address 660 Steamboat Road 3rd Floor		Transaction ID: C1520
City Greenwich State CT Zip Code 06830	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Societe Generale Occupation Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Daniel M. Holtz		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006
Mailing Address 4040 NE 2nd Avenue Suite 414		Transaction ID: C1521
City Miami State FL Zip Code 33137	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Walden Capital Occupation Managing Principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Toni A. Holtz		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006
Mailing Address 4040 N.E. 2nd Avenue Suite 414		Transaction ID: C1522
City Miami State FL Zip Code 33137	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker		
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)	▶	15000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Jerald S. Howe, Jr.		Date of Receipt MM / DD / YYYY 02 / 16 / 2006
Mailing Address 4007 Bradley Lane		Transaction ID: C1506
City State Zip Code Chevy Chase MD 20815	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00
Name of Employer Argotyche, Inc.	Occupation Business Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Brian B. Hughes		Date of Receipt MM / DD / YYYY 03 / 15 / 2006
Mailing Address 6132 Lake Street		Transaction ID: C1530
City State Zip Code Houston TX 77005	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. David G. Johnson		Date of Receipt MM / DD / YYYY 03 / 14 / 2006
Mailing Address 365 N Rockingham Avenue		Transaction ID: C1533
City State Zip Code Los Angeles CA 90049	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00
Name of Employer Goldman Sachs & Company	Occupation Managing Director	
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)	▶	10500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 156
	<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	

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Peter Joseph		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2006
Mailing Address 75 Rockefeller Plaza 9th Floor		Transaction ID: C1609 Amount of Each Receipt this Period 5000.00
City State Zip Code New York NY 10019	FEC ID number of contributing federal political committee. C	
Name of Employer Palladium Equity Partners	Occupation General Partner	Amount of Each Receipt this Period 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Bruce Karsh		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address 1201 Tower Grove Drive		Transaction ID: C1534 Amount of Each Receipt this Period 5000.00
City State Zip Code Beverly Hills CA 90210	FEC ID number of contributing federal political committee. C	
Name of Employer Oaktree Capital	Occupation President	Amount of Each Receipt this Period 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Martha Karsh		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address 1201 Tower Grove		Transaction ID: C1536 Amount of Each Receipt this Period 5000.00
City State Zip Code Beverly Hills CA 90210	FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation Homemaker	Amount of Each Receipt this Period 5000.00
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) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Christina Kenrick		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6	
Mailing Address 528 Tennyson Avenue		Transaction ID: C1513	
City State Zip Code Palo Alto CA 94301		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Stuart S. Kurlander		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6	
Mailing Address 2601 Foxhall Road, N.W.		Transaction ID: C1573	
City State Zip Code Washington DC 20007		Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Latham & Watkins Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	

* In-Kind: Catering

Full Name (Last, First, Middle Initial) C. Martin D. Levion		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 660 Steamboat Road		Transaction ID: C1523	
City State Zip Code Greenwich CT 06830		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Societe Generale Managing Director			
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) ▶	11250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 156
	<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	

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
Kim M. Lewis

Mailing Address 5835 Sentinel Ridge Lane

City State Zip Code
Cincinnati OH 45243

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

Name of Employer Occupation
Dinsmore & Shohl, LLP Attorney

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

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2006

Transaction ID: C1619

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Charles H. Lichtman

Mailing Address 3411 Ottawa Lane

City State Zip Code
Cooper City FL 33026

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

Name of Employer Occupation
Berger Singerman Partner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: C1568

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Neal Manne

Mailing Address 1000 Louisiana Suite 500

City State Zip Code
Houston TX 77002

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

Name of Employer Occupation
Susman, Godfrey, LLP Partner

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

Date of Receipt
M M / D D / Y Y Y Y
01 / 28 / 2006

Transaction ID: C1652

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Nancy McGregor		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 6	
Mailing Address 1000 Louisiana St		Transaction ID: C1653	
City State Zip Code Houston TX 77002		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Susman, Godfrey LLP Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Neill F. Merck		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6	
Mailing Address 705 Mount Hope Street		Transaction ID: C1564	
City State Zip Code Saint Paul MN 55107		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation C.C. Dunnavan & Company Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Gregory R. Metz		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6	
Mailing Address 616 W. Fulton Apt. 207		Transaction ID: C1547	
City State Zip Code Chicago IL 60661		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Kirkland & Ellis Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	6250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 156
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Kenneth P. Morrison		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 822 Forest Avenue		Transaction ID: C1548
City State Zip Code Wilmette IL 60091	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Kirkland & Ellis	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Edward J. Nalbantian		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006
Mailing Address 21 Tudor Street		Transaction ID: C1618
City State Zip Code London UK	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Jones Day Reavis & Pogue	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Suzanne M. Nora Johnson		Date of Receipt M M / D D / Y Y Y Y 01 / 11 / 2006
Mailing Address 365 N. Rockingham Avenue		Transaction ID: C1470
City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Goldman Sachs	Occupation Vice Chairman	
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) ▶	10500.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Mark E. Nunnally		Date of Receipt M M / D D / Y Y Y Y 03 / 08 / 2006
Mailing Address 49 Shaw Street		Transaction ID: C1567
City State Zip Code West Newton MA 02465	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bain Capital	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Cynthia C. Olds		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006
Mailing Address 727 South Warmock Street		Transaction ID: C1524
City State Zip Code Philadelphia PA 19147	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Richard Pachulski		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2006
Mailing Address 100 Copa de Oro		Transaction ID: C1640
City State Zip Code Los Angeles CA 90077	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Klee, Tuchin, Bogdanoff, & Stern L	Occupation Attorney	
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) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 156
	<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	

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Kirk Pasich		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address 10419 Lindbrook Drive		Transaction ID: C1575
City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 210.45	
FEC ID number of contributing federal political committee. C		
Name of Employer Dickstein Shapiro Morin & Oshinsky	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.45	
		* In-Kind: Catering

Full Name (Last, First, Middle Initial) B. Jeffrey J. Peck		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 5900 Cromwell Drive		Transaction ID: C1511
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Johnson Madigan Peck	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Gilbert R. Perry		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 1 Hannah Street		Transaction ID: C1525
City State Zip Code Dartmouth MA 02748	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Smith Barney	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	6210.45
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 156
	<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	

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Craig L. Platt		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2006
Mailing Address 360 Central Park West Apartment 7B		Transaction ID: C1628
City State Zip Code New York NY 10025	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Oppenheimer	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mark D. Plevin		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006
Mailing Address 10408 Bridle Lane		Transaction ID: C1616
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Crowell & Moring	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Richard Ravitch		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006
Mailing Address 610 Fifth Avenue Suite 420		Transaction ID: C1620
City State Zip Code New York NY 10020	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ravich, Rice & Company	Occupation Principal	
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) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. William R. Reid		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006
Mailing Address 1045 Fifth Avenue 5th Floor		Transaction ID: C1526
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Chartwell Investments, Inc.	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Burton P. Resnick		Date of Receipt M M / D D / Y Y Y Y 02 / 16 / 2006
Mailing Address 110 East 59th Street 37th Floor		Transaction ID: C1507
City State Zip Code New York NY 10022	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Jack Resnick & Sons, Inc.	Occupation Chairman & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Stephen L. Ritchie		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 884 Bluff Street		Transaction ID: C1549
City State Zip Code Glencoe IL 60022	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Kirkland & Ellis	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	10500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Mary Ann Ronald		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2006	
Mailing Address 12401 Bacall Lane		Transaction ID: C1556	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Greg A. Rosenbaum		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address 9140 Vendome Drive		Transaction ID: C1630	
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Palisades Associates Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Merchant Banker Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Daniel R. Ross		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006	
Mailing Address 3 Stuyvesant Avenue		Transaction ID: C1527	
City State Zip Code Rye NY 10580	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hooper Holmes, Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Executive Vice President Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. A. Stuart Rubin		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2006	
Mailing Address 718 North Alpine Drive		Transaction ID: C1641	
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Rubin Pachulski Properties	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Joseph F. Savage, Jr.		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2006	
Mailing Address 2 Agassiz Park		Transaction ID: C1608	
City State Zip Code Jamaica Plain MA 02130	Amount of Each Receipt this Period 299.93		
FEC ID number of contributing federal political committee. C			
Name of Employer Goodwin Procker LLP	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.93		

* In-Kind: Catering

Full Name (Last, First, Middle Initial) C. Jeffrey R. Sechrest		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2006	
Mailing Address 850 Park Avenue #2B		Transaction ID: C1499	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Lazard	Occupation Managing Director		
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) ▶	10299.93
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Bui Simon		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 1482 East Valley Road Suite 400		Transaction ID: C1550 Amount of Each Receipt this Period 5000.00
City State Zip Code Santa Barbara CA 93108	FEC ID number of contributing federal political committee. C	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Herb Simon		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 8765 Pine Ridge Drive		Transaction ID: C1551 Amount of Each Receipt this Period 5000.00
City State Zip Code Indianapolis IN 46260	FEC ID number of contributing federal political committee. C	
Name of Employer Simon Property Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CEO Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Heather Smulyan		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address 5101 Green Braes E. Drive		Transaction ID: C1531 Amount of Each Receipt this Period 5000.00
City State Zip Code Indianapolis IN 46234	FEC ID number of contributing federal political committee. C	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Jeffrey H. Smulyan		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 5101 Green Braes East Drive		Transaction ID: C1500	
City State Zip Code Indianapolis IN 46234		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Emmis Communications Occupation Chairman			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Natalie Smulyan		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6	
Mailing Address 438 Sugar Tree Lane		Transaction ID: C1569	
City State Zip Code Indianapolis IN 46260		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. David M. Solomon		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address 145 Central Park West Apt. 4C		Transaction ID: C1504	
City State Zip Code New York NY 10023		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Goldman Sachs & Company Occupation Managing Director			
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) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 156
	(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Stacy A. Steinberg		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 536 Charlemagne Drive		Transaction ID: C1552
City State Zip Code Northbrook IL 60062	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 3000.00
Name of Employer Occupation Homemaker	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00

Full Name (Last, First, Middle Initial) B. Mark Sterling		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006
Mailing Address 5845 S.W. 188th Street		Transaction ID: C1614
City State Zip Code Coral Gables FL 33156	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
Name of Employer Occupation Partner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

Full Name (Last, First, Middle Initial) C. Barbara Stern		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address 3185 Stockton Place		Transaction ID: C1538
City State Zip Code Palo Alto CA 94303	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation Artist	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)	▶	8500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Michael Stern		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006	
Mailing Address 3185 Stockton Place		Transaction ID: C1537	
City State Zip Code Palo Alto CA 94303		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Cooley Godward, LLP Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Phyllis Tabachnick		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006	
Mailing Address 4052 N. Monticello		Transaction ID: C1553	
City State Zip Code Chicago IL 60618		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bear Stearns & Company Investment Banker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Harriet Tamen		Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2006	
Mailing Address 405 Park Avenue 15th Floor		Transaction ID: C1561	
City State Zip Code New York NY 10022		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Rubin, Balln, Ortioli, Mayer, Bake Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	10500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 156
	<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)
All America PAC

Full Name (Last, First, Middle Initial) A. James R. Tobin		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2006
Mailing Address 33 Huckleberry Hill Road		Transaction ID: C1563
City Lincoln State MA Zip Code 01773	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Boston Scientific	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Hugh J. Totten		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 312 N. Euclid		Transaction ID: C1554
City Oak Park State IL Zip Code 60302	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Perkins Coie, LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Dan Weinstein		Date of Receipt M M / D D / Y Y Y Y 02 / 22 / 2006
Mailing Address 9532 Cresta Drive		Transaction ID: C1574
City Los Angeles State CA Zip Code 90035	Amount of Each Receipt this Period 343.90	
FEC ID number of contributing federal political committee. C		
Name of Employer Wetherly Capital Group	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.90	

* In-Kind: Food for Event

SUBTOTAL of Receipts This Page (optional) ▶	10343.90
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Gregory W. Wendt		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address One Muir Loop		Transaction ID: C1501	
City State Zip Code San Francisco CA 94129		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Capital Research Company		Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Lisa Wendt		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address One Muir Loop		Transaction ID: C1502	
City State Zip Code San Francisco CA 94129		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer W.R. Hambrecht		Occupation Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Joseph Wolfson		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address 513 Attenburg Rd		Transaction ID: C1631	
City State Zip Code Villanova PA 19075		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Stevens & Lee		Occupation Attorney	
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) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	385100.18

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

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

FOR LINE NUMBER: PAGE 39 / 156
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
Allied Capital Corporation PAC

Mailing Address 1919 Pennsylvania Avenue, NW
Suite 300

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00406884

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2006

Transaction ID: C1617

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue, NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2006

Transaction ID: C1615

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
American Federation of Teachers COPE

Mailing Address 555 New Jersey Avenue, N.W.

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2006

Transaction ID: C1560

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 156
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
All America PAC

A. Full Name (Last, First, Middle Initial)
Massachusetts Mutual Life Insurance Co. PAC

Mailing Address 1295 State Street

City State Zip Code
Springfield MA 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 18 / 2006

Transaction ID: C1471

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Nelnet, Inc. PAC

Mailing Address 1726 M Street NW Suite 701

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00370015

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2006

Transaction ID: C1558

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Sheet Metal Workers Political Action League

Mailing Address 1750 New York Avenue, N.W.

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 22 / 2006

Transaction ID: C1508

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 12000.00

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

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

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

FOR LINE NUMBER: PAGE 41 / 156
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
UAW-V-CAP

Mailing Address 8000 East Jefferson Avenue

City State Zip Code
Detroit MI 48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 18 / 2006

Transaction ID: C1559

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Wal-Mart Stores Inc. PAC For Responsible Government

Mailing Address 702 SW 8th Street

City State Zip Code
Bentonville AR 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 14 / 2006

Transaction ID: C1535

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	▶	7500.00
TOTAL This Period (last page this line number only)	▶	34500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 156
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial) Paychex		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6	
Mailing Address 3060 Williams Drive		Transaction ID: C1599	
City State Zip Code Fairfax VA 22031	Amount of Each Receipt this Period 887.76		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 4607.56		

B. Full Name (Last, First, Middle Initial) Paychex		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6	
Mailing Address 3060 Williams Drive		Transaction ID: C1600	
City State Zip Code Fairfax VA 22031	Amount of Each Receipt this Period 3719.80		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 4607.56		

SUBTOTAL of Receipts This Page (optional) ▶	4607.56
TOTAL This Period (last page this line number only) ▶	4607.56

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 156
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address Three First National Plaza		Transaction ID: C1578
City State Zip Code Chicago IL 60602		Amount of Each Receipt this Period 10.49
FEC ID number of contributing federal political committee. C		* Dividend Income
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	

Full Name (Last, First, Middle Initial) B. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address Three First National Plaza		Transaction ID: C1584
City State Zip Code Chicago IL 60602		Amount of Each Receipt this Period 126.00
FEC ID number of contributing federal political committee. C		* Interest Income
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	

Full Name (Last, First, Middle Initial) C. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address Three First National Plaza		Transaction ID: C1585
City State Zip Code Chicago IL 60602		Amount of Each Receipt this Period 449.17
FEC ID number of contributing federal political committee. C		* Interest Income
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	

SUBTOTAL of Receipts This Page (optional) ▶	585.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: PAGE 44 / 156
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.
Mailing Address Three First National Plaza
City State Zip Code
Chicago IL 60602
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2832.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 6 / 2 0 0 6
Transaction ID: C1586
Amount of Each Receipt this Period
33.85
* Interest Income

B. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.
Mailing Address Three First National Plaza
City State Zip Code
Chicago IL 60602
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2832.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 1 3 / 2 0 0 6
Transaction ID: C1587
Amount of Each Receipt this Period
78.99
* Interest Income

C. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.
Mailing Address Three First National Plaza
City State Zip Code
Chicago IL 60602
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2832.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 0 / 2 0 0 6
Transaction ID: C1588
Amount of Each Receipt this Period
74.13
* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **186.97**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 45 / 156
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.
Mailing Address Three First National Plaza
City State Zip Code
Chicago IL 60602
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2832.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 7 / 2 0 0 6
Transaction ID: C1589
Amount of Each Receipt this Period
72.92
* Interest Income

B. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.
Mailing Address Three First National Plaza
City State Zip Code
Chicago IL 60602
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2832.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 6
Transaction ID: C1579
Amount of Each Receipt this Period
158.52
* Dividend Income

C. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.
Mailing Address Three First National Plaza
City State Zip Code
Chicago IL 60602
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2832.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 3 / 2 0 0 6
Transaction ID: C1593
Amount of Each Receipt this Period
72.43
* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **303.87**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 156
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6
Mailing Address Three First National Plaza		Transaction ID: C1594
City State Zip Code Chicago IL 60602	Amount of Each Receipt this Period 456.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	* Interest Income

Full Name (Last, First, Middle Initial) B. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address Three First National Plaza		Transaction ID: C1595
City State Zip Code Chicago IL 60602	Amount of Each Receipt this Period 74.13	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	* Interest Income

Full Name (Last, First, Middle Initial) C. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6
Mailing Address Three First National Plaza		Transaction ID: C1596
City State Zip Code Chicago IL 60602	Amount of Each Receipt this Period 74.13	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	* Interest Income

SUBTOTAL of Receipts This Page (optional) ▶	604.72
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 156
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address Three First National Plaza		Transaction ID: C1597
City State Zip Code Chicago IL 60602		Amount of Each Receipt this Period 118.61
FEC ID number of contributing federal political committee. C		* Interest Income
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	

Full Name (Last, First, Middle Initial) B. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address Three First National Plaza		Transaction ID: C1598
City State Zip Code Chicago IL 60602		Amount of Each Receipt this Period 72.92
FEC ID number of contributing federal political committee. C		* Interest Income
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	

Full Name (Last, First, Middle Initial) C. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address Three First National Plaza		Transaction ID: C1580
City State Zip Code Chicago IL 60602		Amount of Each Receipt this Period 7.21
FEC ID number of contributing federal political committee. C		* Dividend Income
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	

SUBTOTAL of Receipts This Page (optional) ▶	198.74
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 156
(check only one)

11a 11b 11c 12
 13 14 15 16 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)
All America PAC

A. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.

Mailing Address Three First National Plaza

City State Zip Code
Chicago IL 60602

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2832.41

Date of Receipt
MM / DD / YYYY
03 / 01 / 2006

Transaction ID: C1655

Amount of Each Receipt this Period
8.18

* Dividend Income

B. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.

Mailing Address Three First National Plaza

City State Zip Code
Chicago IL 60602

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2832.41

Date of Receipt
MM / DD / YYYY
03 / 03 / 2006

Transaction ID: C1656

Amount of Each Receipt this Period
76.56

* Interest Income

C. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.

Mailing Address Three First National Plaza

City State Zip Code
Chicago IL 60602

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2832.41

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: C1657

Amount of Each Receipt this Period
75.35

* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **160.09**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 156
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006
Mailing Address Three First National Plaza		Transaction ID: C1658
City State Zip Code Chicago IL 60602	Amount of Each Receipt this Period 447.71	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	* Interest Income

Full Name (Last, First, Middle Initial) B. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address Three First National Plaza		Transaction ID: C1659
City State Zip Code Chicago IL 60602	Amount of Each Receipt this Period 72.67	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	* Interest Income

Full Name (Last, First, Middle Initial) C. Bear Stearns & Company, Inc.		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2006
Mailing Address Three First National Plaza		Transaction ID: C1660
City State Zip Code Chicago IL 60602	Amount of Each Receipt this Period 122.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2832.41	* Interest Income

SUBTOTAL of Receipts This Page (optional) ▶	642.88
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 50 / 156
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.
Mailing Address Three First National Plaza
City State Zip Code
Chicago IL 60602
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2832.41

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2006
Transaction ID: C1661
Amount of Each Receipt this Period
72.92
* Interest Income

B. Full Name (Last, First, Middle Initial)
Bear Stearns & Company, Inc.
Mailing Address Three First National Plaza
City State Zip Code
Chicago IL 60602
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2832.41

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2006
Transaction ID: C1662
Amount of Each Receipt this Period
76.56
* Interest Income

C. Full Name (Last, First, Middle Initial)
National Bank of Indianapolis
Mailing Address 107 North Pennsylvania Street
Suite 700
City State Zip Code
Indianapolis IN 46204
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
3213.73

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 31 / 2006
Transaction ID: C1601
Amount of Each Receipt this Period
13.85
* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **163.33**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 51 / 156
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street
Suite 700

City State Zip Code
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3213.73

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 6

Transaction ID: C1603

Amount of Each Receipt this Period
276.61

* Interest Income

B. Full Name (Last, First, Middle Initial)
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street
Suite 700

City State Zip Code
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3213.73

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 6

Transaction ID: C1602

Amount of Each Receipt this Period
851.18

* Interest Income

C. Full Name (Last, First, Middle Initial)
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street
Suite 700

City State Zip Code
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3213.73

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 6

Transaction ID: C1605

Amount of Each Receipt this Period
200.05

* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **1327.84**

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

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

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

FOR LINE NUMBER: PAGE 52 / 156
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street
Suite 700

City State Zip Code
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3213.73

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 6

Transaction ID: C1606

Amount of Each Receipt this Period
822.57

* Interest Income

B. Full Name (Last, First, Middle Initial)
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street
Suite 700

City State Zip Code
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3213.73

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 6

Transaction ID: C1604

Amount of Each Receipt this Period
5.93

* Interest Income

C. Full Name (Last, First, Middle Initial)
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street
Suite 700

City State Zip Code
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3213.73

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 6

Transaction ID: C1621

Amount of Each Receipt this Period
1.19

* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **829.69**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 156
	(check only one)	
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. National Bank of Indianapolis		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2006
Mailing Address 107 North Pennsylvania Street Suite 700		Transaction ID: C1622
City Indianapolis State IN Zip Code 46204	Amount of Each Receipt this Period 557.79	
FEC ID number of contributing federal political committee. C		* Interest Income
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3213.73	

Full Name (Last, First, Middle Initial) B. National Bank of Indianapolis		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2006
Mailing Address 107 North Pennsylvania Street Suite 700		Transaction ID: C1623
City Indianapolis State IN Zip Code 46204	Amount of Each Receipt this Period 484.56	
FEC ID number of contributing federal political committee. C		* Interest Income
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3213.73	

SUBTOTAL of Receipts This Page (optional)	1042.35
TOTAL This Period (last page this line number only)	6046.14

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: D2035 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6
Mailing Address Suite 0001		Amount of Each Disbursement this Period 162.50
City Chicago State IL Zip Code 60601	Category/ Type	
Purpose of Disbursement Credit Card Processing Fee		
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. American Express		Transaction ID: D2036 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6
Mailing Address Suite 0001		Amount of Each Disbursement this Period 197.44
City Chicago State IL Zip Code 60601	Category/ Type	
Purpose of Disbursement Credit Card Processing Fee		
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) C. American Express		Transaction ID: D2191 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address Suite 0001		Amount of Each Disbursement this Period 978.25
City Chicago State IL Zip Code 60601	Category/ Type	
Purpose of Disbursement Credit Card Processing Fee		
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) ▶	1338.19
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Angel Food Catering, Inc.		Transaction ID: D2126 Date of Disbursement 01 / 11 / 2006
Mailing Address 81 Depot Place		Amount of Each Disbursement this Period 1194.00
City Nyack State NY Zip Code 10960	Purpose of Disbursement Catering	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Paulette L. Aniskoff		Transaction ID: D2166 Date of Disbursement 01 / 11 / 2006
Mailing Address 227 W Eleventh Street Apt. 65		Amount of Each Disbursement this Period 172.01
City New York State NY Zip Code 10014	Purpose of Disbursement Reimbursement-Travel & Shipping	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Paulette L. Aniskoff		Transaction ID: D2167 Date of Disbursement 03 / 01 / 2006
Mailing Address 227 W Eleventh Street Apt. 65		Amount of Each Disbursement this Period 101.31
City New York State NY Zip Code 10014	Purpose of Disbursement Reimbursement-Postage & Office Expenses	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1467.32
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Avis Industrial		Transaction ID: D2127 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6
Mailing Address 1909 South Main Street		Amount of Each Disbursement this Period 817.80
City Upland State IN Zip Code 46989	Purpose of Disbursement Travel on 3/3/06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cynthia Babak		Transaction ID: D2141 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address 3060 17th Street		Amount of Each Disbursement this Period 210.00
City Brooklyn State NY Zip Code 11215	Purpose of Disbursement Catering	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CareFirst Blue Cross Blue Shield		Transaction ID: D2042 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 840 First Street, NE		Amount of Each Disbursement this Period 1499.09
City Washington State DC Zip Code 20065	Purpose of Disbursement Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2526.89
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. CareFirst Blue Cross Blue Shield		Transaction ID: D2043 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 840 First Street, NE		Amount of Each Disbursement this Period 1683.00
City Washington State DC Zip Code 20065	Purpose of Disbursement Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CareFirst Blue Cross Blue Shield		Transaction ID: D2044 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 840 First Street, NE		Amount of Each Disbursement this Period 3899.00
City Washington State DC Zip Code 20065	Purpose of Disbursement Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Amber N. Carrier		Transaction ID: D2034 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address 3606 S Street, NW		Amount of Each Disbursement this Period 850.00
City Washington State DC Zip Code 20007	Purpose of Disbursement Stipend Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6432.00
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Amber N. Carrier		Transaction ID: D2125 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 3606 S Street, NW		Amount of Each Disbursement this Period 49.25
City Washington State DC Zip Code 20007	Purpose of Disbursement Reimbursement-Travel & Postage 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Amber N. Carrier		Transaction ID: D2123 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 3606 S Street, NW		Amount of Each Disbursement this Period 268.00
City Washington State DC Zip Code 20007	Purpose of Disbursement Stipend 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Amber N. Carrier		Transaction ID: D2124 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 3606 S Street, NW		Amount of Each Disbursement this Period 54.55
City Washington State DC Zip Code 20007	Purpose of Disbursement Reimbursement-Travel & Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	371.80
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Cingular Wireless		Transaction ID: D2052 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address P.O. Box 17356		Amount of Each Disbursement this Period 205.41
City Baltimore State MD Zip Code 21297	Purpose of Disbursement Telephone Service 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Cingular Wireless		Transaction ID: D2053 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 17356		Amount of Each Disbursement this Period 173.82
City Baltimore State MD Zip Code 21297	Purpose of Disbursement Telephone Service 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Brandy Coletta		Transaction ID: D2037 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address 41 Union Avenue		Amount of Each Disbursement this Period 1000.00
City Memphis State TN Zip Code 38103	Purpose of Disbursement Fundraising Consulting Services 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) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1379.23
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 60 / 156

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Brandy Coletta		Transaction ID: D2128 Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2006	
Mailing Address 41 Union Avenue		Amount of Each Disbursement this Period 627.98	
City Memphis State TN Zip Code 38103	Purpose of Disbursement Travel	Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:			

Full Name (Last, First, Middle Initial) B. Coletta & Company, Inc.		Transaction ID: D2054 Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2006	
Mailing Address 41 Union Avenue		Amount of Each Disbursement this Period 2500.00	
City Memphis State TN Zip Code 38103	Purpose of Disbursement Fundraising Consulting Services	Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:			

Full Name (Last, First, Middle Initial) C. Coletta & Company, Inc.		Transaction ID: D2055 Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2006	
Mailing Address 41 Union Avenue		Amount of Each Disbursement this Period 2500.00	
City Memphis State TN Zip Code 38103	Purpose of Disbursement Fundraising Consulting Services	Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	5627.98
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Coletta & Company, Inc.		Transaction ID: D2056 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 41 Union Avenue		Amount of Each Disbursement this Period 2500.00
City Memphis State TN Zip Code 38103	Category/ Type	
Purpose of Disbursement Fundraising Consulting Services		
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. Comcast		Transaction ID: D2057 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address 900 Michigan Avenue, NE		Amount of Each Disbursement this Period 4.73
City Washington State DC Zip Code 20017	Category/ Type	
Purpose of Disbursement Cable		
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) C. Comcast		Transaction ID: D2058 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 900 Michigan Avenue, NE		Amount of Each Disbursement this Period 291.75
City Washington State DC Zip Code 20017	Category/ Type	
Purpose of Disbursement Cable		
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) ▶	2796.48
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Dean & Deluca		Transaction ID: D2143 Date of Disbursement MM / DD / YYYY 03 / 01 / 2006
Mailing Address P.O. Box 2399		Amount of Each Disbursement this Period 268.68
City Wichita	State KS	
Zip Code 67201	Category/ Type	
Purpose of Disbursement Catering		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Deer Park		Transaction ID: D2062 Date of Disbursement MM / DD / YYYY 02 / 02 / 2006
Mailing Address P.O. Box 52271		Amount of Each Disbursement this Period 45.72
City Phoenix	State AZ	
Zip Code 85072	Category/ Type	
Purpose of Disbursement Office Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Fairbanks Maslin Maullin & Associates		Transaction ID: D2092 Date of Disbursement MM / DD / YYYY 02 / 02 / 2006
Mailing Address 2425 Colorado Avenue Suite 180		Amount of Each Disbursement this Period 4000.00
City Santa Monica	State CA	
Zip Code 90404	Category/ Type	
Purpose of Disbursement Political Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4314.40
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Fairbanks Maslin Maullin & Associates		Transaction ID: D2145 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 2425 Colorado Avenue Suite 180		Amount of Each Disbursement this Period 899.52
City Santa Monica State CA Zip Code 90404	Purpose of Disbursement Travel 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. Marc Farinella		Transaction ID: D2159 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 7979 Bradwick Way		Amount of Each Disbursement this Period 5438.74
City Melbourne State FL Zip Code 32940	Purpose of Disbursement Political Consulting Services & Travel 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) C. Michael Farris		Transaction ID: D1813 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6
Mailing Address 918 Huntington Road		Amount of Each Disbursement this Period 632.62
City Ducanville State TX Zip Code 75157	Purpose of Disbursement Payroll 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) ▶	6970.88
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Michael Farris		Transaction ID: D2071 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 918 Huntington Road		Amount of Each Disbursement this Period 632.62	
City Ducanville	State TX	Zip Code 75157	Category/ Type
Purpose of Disbursement Payroll		<input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Michael Farris		Transaction ID: D1823 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6	
Mailing Address 918 Huntington Road		Amount of Each Disbursement this Period 632.62	
City Ducanville	State TX	Zip Code 75157	Category/ Type
Purpose of Disbursement Payroll		<input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Michael Farris		Transaction ID: D2072 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 918 Huntington Road		Amount of Each Disbursement this Period 632.62	
City Ducanville	State TX	Zip Code 75157	Category/ Type
Purpose of Disbursement Payroll		<input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶

1897.86

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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Michael Farris		Transaction ID: D2073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 918 Huntington Road		Amount of Each Disbursement this Period 632.62
City Ducanville State TX Zip Code 75157	Category/ Type	
Purpose of Disbursement Payroll		
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. Michael Farris		Transaction ID: D2023 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 918 Huntington Road		Amount of Each Disbursement this Period 632.62
City Ducanville State TX Zip Code 75157	Category/ Type	
Purpose of Disbursement Payroll		
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) C. Julie Fitzgerald		Transaction ID: D2149 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 310.39
City Santa Monica State CA Zip Code 90403	Category/ Type	
Purpose of Disbursement Reimbursement-Telephone		
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) ▶	1575.63
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Julie Fitzgerald		Transaction ID: D2150 Date of Disbursement 01 / 03 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 649.87
City Santa Monica State CA Zip Code 90403	Purpose of Disbursement Reimbursement-Travel & Telephone 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Julie Fitzgerald		Transaction ID: D2151 Date of Disbursement 01 / 11 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 154.03
City Santa Monica State CA Zip Code 90403	Purpose of Disbursement Reimbursement-Travel 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Julie Fitzgerald		Transaction ID: D1814 Date of Disbursement 01 / 13 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 754.94
City Santa Monica State CA Zip Code 90403	Purpose of Disbursement Payroll 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) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1558.84
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Julie Fitzgerald		Transaction ID: D2064 Date of Disbursement 01 / 31 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 754.94
City Santa Monica State CA Zip Code 90403	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Julie Fitzgerald		Transaction ID: D2153 Date of Disbursement 02 / 02 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 463.93
City Santa Monica State CA Zip Code 90403	Purpose of Disbursement Reimbursement-Travel & Office Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Julie Fitzgerald		Transaction ID: D1824 Date of Disbursement 02 / 15 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 754.94
City Santa Monica State CA Zip Code 90403	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1973.81
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Julie Fitzgerald		Transaction ID: D2065 Date of Disbursement MM / DD / YYYY 02 / 28 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 754.94
City Santa Monica State CA Zip Code 90403	Category/ Type	
Purpose of Disbursement Payroll		
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. Julie Fitzgerald		Transaction ID: D2152 Date of Disbursement MM / DD / YYYY 03 / 01 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 378.96
City Santa Monica State CA Zip Code 90403	Category/ Type	
Purpose of Disbursement Reimbursement-Postage & Office Expenses		
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) C. Julie Fitzgerald		Transaction ID: D2066 Date of Disbursement MM / DD / YYYY 03 / 15 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 2406.41
City Santa Monica State CA Zip Code 90403	Category/ Type	
Purpose of Disbursement Payroll		
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) ▶	3540.31
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Julie Fitzgerald		Transaction ID: D2024 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 1121.69
City Santa Monica State CA Zip Code 90403		
Purpose of Disbursement Payroll Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Stefanie Freeman		Transaction ID: D1815 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6
Mailing Address 2120 16th Street, NW Apt. 311		Amount of Each Disbursement this Period 1456.96
City Washington State DC Zip Code 20009		
Purpose of Disbursement Payroll Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Stefanie Freeman		Transaction ID: D2106 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 2120 16th Street, NW Apt. 311		Amount of Each Disbursement this Period 1456.96
City Washington State DC Zip Code 20009		
Purpose of Disbursement Payroll Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4035.61
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Stefanie Freeman		Transaction ID: D1825 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 2120 16th Street, NW Apt. 311		Amount of Each Disbursement this Period 1456.96
City Washington State DC Zip Code 20009		
Purpose of Disbursement Payroll Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Stefanie Freeman		Transaction ID: D2107 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 2120 16th Street, NW Apt. 311		Amount of Each Disbursement this Period 1456.96
City Washington State DC Zip Code 20009		
Purpose of Disbursement Payroll Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Stefanie Freeman		Transaction ID: D2108 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 2120 16th Street, NW Apt. 311		Amount of Each Disbursement this Period 1456.96
City Washington State DC Zip Code 20009		
Purpose of Disbursement Payroll Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4370.88
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Stefanie Freeman		Transaction ID: D2025 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 2120 16th Street, NW Apt. 311		Amount of Each Disbursement this Period 1456.96
City Washington State DC Zip Code 20009	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Christopher Hayler		Transaction ID: D2049 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 1749.71
City Washington State DC Zip Code 20003	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christopher Hayler		Transaction ID: D2135 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 316.96
City Washington State DC Zip Code 20003	Purpose of Disbursement Reimbursement-Travel & Office Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3523.63
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Christopher Hayler		Transaction ID: D2134 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 475.33
City Washington State DC Zip Code 20003	Purpose of Disbursement Reimbursement-Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Christopher Hayler		Transaction ID: D2050 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 1331.63
City Washington State DC Zip Code 20003	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christopher Hayler		Transaction ID: D2051 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 1749.71
City Washington State DC Zip Code 20003	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3556.67
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Christopher Hayler		Transaction ID: D2026 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 1749.71
City Washington State DC Zip Code 20003	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Christopher Hayler		Transaction ID: D2133 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 1024.67
City Washington State DC Zip Code 20003	Purpose of Disbursement Reimbursement-Moving Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christopher Hayler		Transaction ID: D2136 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 337.39
City Washington State DC Zip Code 20003	Purpose of Disbursement Reimbursement-Travel & Office Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3111.77
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Malcolm Heinicke		Transaction ID: D1842 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6
Mailing Address 1738 14th Avenue		Amount of Each Disbursement this Period 245.90
City San Francisco State CA Zip Code 94122	* in-kind received	
Purpose of Disbursement Travel & Catering Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Johnny Howard Designs, Inc.		Transaction ID: D2148 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 8609 Sanford Drive		Amount of Each Disbursement this Period 446.94
City Richmond State VA Zip Code 23228	Category/Type	
Purpose of Disbursement Printing 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) C. Johnny Howard Designs, Inc.		Transaction ID: D2147 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 8609 Sanford Drive		Amount of Each Disbursement this Period 136.28
City Richmond State VA Zip Code 23228	Category/Type	
Purpose of Disbursement Printing 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) ▶	829.12
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
All America PAC

Full Name (Last, First, Middle Initial) A. Natalie Jones		Transaction ID: D1816 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6
Mailing Address 1325 18th Street, NW Suite 708		Amount of Each Disbursement this Period 975.99
City Washington State DC Zip Code 20007	Category/ Type	
Purpose of Disbursement Payroll		
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. Natalie Jones		Transaction ID: D2079 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 1325 18th Street, NW Suite 708		Amount of Each Disbursement this Period 975.99
City Washington State DC Zip Code 20007	Category/ Type	
Purpose of Disbursement Payroll		
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) C. Natalie Jones		Transaction ID: D1826 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 1325 18th Street, NW Suite 708		Amount of Each Disbursement this Period 975.99
City Washington State DC Zip Code 20007	Category/ Type	
Purpose of Disbursement Payroll		
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) ▶	2927.97
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Natalie Jones		Transaction ID: D2080 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 1325 18th Street, NW Suite 708		Amount of Each Disbursement this Period 975.99
City Washington State DC Zip Code 20007	Category/ Type	
Purpose of Disbursement Payroll		
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. Natalie Jones		Transaction ID: D2081 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 1325 18th Street, NW Suite 708		Amount of Each Disbursement this Period 1314.58
City Washington State DC Zip Code 20007	Category/ Type	
Purpose of Disbursement Payroll		
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) C. Natalie Jones		Transaction ID: D2027 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 1325 18th Street, NW Suite 708		Amount of Each Disbursement this Period 1314.58
City Washington State DC Zip Code 20007	Category/ Type	
Purpose of Disbursement Payroll		
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) ▶	3605.15
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Byron L. Kantrow		Transaction ID: D2130 Date of Disbursement 01 / 11 / 2006
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 432.39
City New York State NY Zip Code 10019	Purpose of Disbursement Reimbursement-Travel & Office Expenses 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Byron L. Kantrow		Transaction ID: D1817 Date of Disbursement 01 / 13 / 2006
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 1187.70
City New York State NY Zip Code 10019	Purpose of Disbursement Payroll 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Byron L. Kantrow		Transaction ID: D2129 Date of Disbursement 01 / 18 / 2006
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 239.80
City New York State NY Zip Code 10019	Purpose of Disbursement Reimbursement-Travel & Office Expenses 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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1859.89
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Byron L. Kantrow		Transaction ID: D2038 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 1187.70
City New York State NY Zip Code 10019	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Byron L. Kantrow		Transaction ID: D2131 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 367.36
City New York State NY Zip Code 10019	Purpose of Disbursement Reimbursement-Travel & Telephone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Byron L. Kantrow		Transaction ID: D1827 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 1187.70
City New York State NY Zip Code 10019	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2742.76
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Byron L. Kantrow		Transaction ID: D2039 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 1187.70
City New York State NY Zip Code 10019	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Byron L. Kantrow		Transaction ID: D2040 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 1187.70
City New York State NY Zip Code 10019	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Byron L. Kantrow		Transaction ID: D2028 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 1187.70
City New York State NY Zip Code 10019	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3563.10
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Cathy King		Transaction ID: D2132 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6	
Mailing Address 29 Beech Street		Amount of Each Disbursement this Period 210.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Catering	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Stuart S. Kurlander		Transaction ID: D1838 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6	
Mailing Address 2601 Foxhall Road, N.W.		Amount of Each Disbursement this Period 1250.00	
City Washington State DC Zip Code 20007	Purpose of Disbursement Catering	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

* in-kind received

Full Name (Last, First, Middle Initial) C. Dana Magliola		Transaction ID: D1818 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6	
Mailing Address 475 Commonwealth Avenue		Amount of Each Disbursement this Period 805.37	
City Boston State MA Zip Code 02215	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2265.37
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Dana Magliola		Transaction ID: D2059 Date of Disbursement 01 / 31 / 2006
Mailing Address 475 Commonwealth Avenue		Amount of Each Disbursement this Period 805.37
City Boston State MA Zip Code 02215	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dana Magliola		Transaction ID: D1828 Date of Disbursement 02 / 15 / 2006
Mailing Address 475 Commonwealth Avenue		Amount of Each Disbursement this Period 805.37
City Boston State MA Zip Code 02215	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dana Magliola		Transaction ID: D2060 Date of Disbursement 02 / 28 / 2006
Mailing Address 475 Commonwealth Avenue		Amount of Each Disbursement this Period 805.37
City Boston State MA Zip Code 02215	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2416.11
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Dana Magliola		Transaction ID: D2061 Date of Disbursement MM / DD / YYYY 03 / 15 / 2006
Mailing Address 475 Commonwealth Avenue		Amount of Each Disbursement this Period 381.22
City Boston State MA Zip Code 02215	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Merchant Services		Transaction ID: D2069 Date of Disbursement MM / DD / YYYY 01 / 03 / 2006
Mailing Address P.O. Box 13305		Amount of Each Disbursement this Period 79.60
City Spokane State WA Zip Code 99213	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Merchant Services		Transaction ID: D2070 Date of Disbursement MM / DD / YYYY 02 / 02 / 2006
Mailing Address P.O. Box 13305		Amount of Each Disbursement this Period 226.87
City Spokane State WA Zip Code 99213	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	687.69
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Merchant Services		Transaction ID: D2189 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 6
Mailing Address P.O. Box 13305		Amount of Each Disbursement this Period 76.67
City Spokane State WA Zip Code 99213	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nancy Jacobson Consulting, Inc.		Transaction ID: D2160 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 1199.78
City Washington State DC Zip Code 20008	Purpose of Disbursement Telephone/Rent/Shipping	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nancy Jacobson Consulting, Inc.		Transaction ID: D2161 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 1701.47
City Washington State DC Zip Code 20008	Purpose of Disbursement Telephone/Travel/Rent/Shipping	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2977.92
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Nancy Jacobson Consulting, Inc.		Transaction ID: D2074 Date of Disbursement 01 / 03 / 2006
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20008	Category/ Type	
Purpose of Disbursement Fundraising Consulting Services		
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. Nancy Jacobson Consulting, Inc.		Transaction ID: D2075 Date of Disbursement 01 / 20 / 2006
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20008	Category/ Type	
Purpose of Disbursement Fundraising Consulting Services		
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) C. Nancy Jacobson Consulting, Inc.		Transaction ID: D2076 Date of Disbursement 02 / 16 / 2006
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20008	Category/ Type	
Purpose of Disbursement Fundraising Consulting Services		
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) ▶	15000.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Nancy Jacobson Consulting, Inc.		Transaction ID: D2162 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 927.84
City Washington State DC Zip Code 20008	Purpose of Disbursement Rent/Postage/Telephone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nancy Jacobson Consulting, Inc.		Transaction ID: D2077 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20008	Purpose of Disbursement Fundraising Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nancy Jacobson Consulting, Inc.		Transaction ID: D2078 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 10000.00
City Washington State DC Zip Code 20008	Purpose of Disbursement Fundraising Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15927.84
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Nancy Jacobson Consulting, Inc.		Transaction ID: D2163 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 0 6
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 858.36
City Washington State DC Zip Code 20008	Purpose of Disbursement Rent/Telephone 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. National Bank of Indianapolis		Transaction ID: D2083 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 25.00
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement Bank Fee 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. National Bank of Indianapolis		Transaction ID: D2082 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 25.00
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement Bank Fee 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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	908.36
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. National Bank of Indianapolis		Transaction ID: D2095 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 3.00
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Bank Fee Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. National Bank of Indianapolis		Transaction ID: D2084 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 3.00
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Bank Fee Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. National Bank of Indianapolis		Transaction ID: D2186 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 3.00
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Bank Fee Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	9.00
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. National Bank of Indianapolis		Transaction ID: D1837 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 6167.35
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Federal Income Taxes Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. National Bank of Indianapolis		Transaction ID: D2187 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 12.00
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Bank Fee Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. National Bank of Indianapolis		Transaction ID: D2188 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 25.00
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Bank Fee Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	6204.35
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
All America PAC

Full Name (Last, First, Middle Initial) A. Kirk Pasich		Transaction ID: D1840 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address 10419 Lindbrook Drive		Amount of Each Disbursement this Period 210.45
City Los Angeles State CA Zip Code 90024	* in-kind received	
Purpose of Disbursement Catering Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: D2089 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 164.75
City Fairfax State VA Zip Code 22031	Category/Type	
Purpose of Disbursement Payroll Services 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) C. Paychex		Transaction ID: D1822 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 8621.65
City Fairfax State VA Zip Code 22031	Category/Type	
Purpose of Disbursement Payroll Taxes 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) ▶	8996.85
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)
All America PAC

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: D2085 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 4014.09
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: D2090 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 336.21
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Services 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: D1832 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 4014.09
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes 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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	8364.39
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: D2086 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 5448.52
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement Payroll Taxes	Category/ Type	
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. Paychex		Transaction ID: D2091 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 216.06
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement Payroll Services	Category/ Type	
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) C. Paychex		Transaction ID: D2088 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 1029.04
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement Payroll Taxes	Category/ Type	
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) ▶	6693.62
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: D2087 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 6137.73
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: D2033 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 5354.55
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Pepco		Transaction ID: D2093 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address PO Box 97275		Amount of Each Disbursement this Period 156.69
City Washington State DC Zip Code 20090	Purpose of Disbursement Utilities 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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	11648.97
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Pepco		Transaction ID: D2094 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 97275		Amount of Each Disbursement this Period 110.08
City Washington State DC Zip Code 20090	Category/ Type	
Purpose of Disbursement Utilities		
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. PoliTemps		Transaction ID: D2096 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 2000 P Street, N.W. Suite 400		Amount of Each Disbursement this Period 1270.00
City Washington State DC Zip Code 20036	Category/ Type	
Purpose of Disbursement Temporary Office Assistance		
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) C. Quick Messenger Service		Transaction ID: D2097 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address 4829 Fairmont Avenue		Amount of Each Disbursement this Period 119.19
City Bethesda State MD Zip Code 20814	Category/ Type	
Purpose of Disbursement Courier Services		
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) ▶	1499.27
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)
All America PAC

Full Name (Last, First, Middle Initial)		Transaction ID: D2098																					
A. Quick Messenger Service		Date of Disbursement																					
Mailing Address 4829 Fairmont Avenue		<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>2</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	2		0	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	1		2	0	0	6														
City Bethesda State MD Zip Code 20814		Amount of Each Disbursement this Period																					
Purpose of Disbursement Courier Services		<table border="1"> <tr> <td colspan="10">677.00</td> </tr> </table>		677.00																			
677.00																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial)		Transaction ID: D2099																					
B. Quick Messenger Service		Date of Disbursement																					
Mailing Address 4829 Fairmont Avenue		<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>2</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	2		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	2		2	0	0	6														
City Bethesda State MD Zip Code 20814		Amount of Each Disbursement this Period																					
Purpose of Disbursement Courier Services		<table border="1"> <tr> <td colspan="10">8.75</td> </tr> </table>		8.75																			
8.75																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial)		Transaction ID: D2100																					
C. Quick Messenger Service		Date of Disbursement																					
Mailing Address 4829 Fairmont Avenue		<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>2</td><td></td><td>0</td><td>6</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	2		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	6		2	0	0	6														
City Bethesda State MD Zip Code 20814		Amount of Each Disbursement this Period																					
Purpose of Disbursement Courier Services		<table border="1"> <tr> <td colspan="10">600.72</td> </tr> </table>		600.72																			
600.72																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)	▶	<table border="1"><tr><td>1286.47</td></tr></table>	1286.47
1286.47			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td> </td></tr></table>	

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)
All America PAC

Full Name (Last, First, Middle Initial) A. Quick Messenger Service		Transaction ID: D2101 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 4829 Fairmont Avenue		Amount of Each Disbursement this Period 105.36
City Bethesda State MD Zip Code 20814	Purpose of Disbursement Courier Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Qwikservices, LLC		Transaction ID: D2169 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 3101 East Shea Suite 201		Amount of Each Disbursement this Period 201.22
City Phoenix State AZ Zip Code 85028	Purpose of Disbursement Telephone Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Qwikservices, LLC		Transaction ID: D2170 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 3101 East Shea Suite 201		Amount of Each Disbursement this Period 640.96
City Phoenix State AZ Zip Code 85028	Purpose of Disbursement Telephone Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	947.54
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. REA Associates, LLC		Transaction ID: D2102 Date of Disbursement 01 / 25 / 2006
Mailing Address 900 2nd Street, NE Suite 114		Amount of Each Disbursement this Period 1600.00
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. REA Associates, LLC		Transaction ID: D2171 Date of Disbursement 02 / 06 / 2006
Mailing Address 900 2nd Street, NE Suite 114		Amount of Each Disbursement this Period 2591.97
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Rent & Parking		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. REA Associates, LLC		Transaction ID: D2103 Date of Disbursement 03 / 01 / 2006
Mailing Address 900 2nd Street, NE Suite 114		Amount of Each Disbursement this Period 1600.00
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	5791.97
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. REA Associates, LLC		Transaction ID: D2172 Date of Disbursement MM / DD / YYYY 03 / 06 / 2006
Mailing Address 900 2nd Street, NE Suite 114		Amount of Each Disbursement this Period 1269.27
City Washington State DC Zip Code 20002	Purpose of Disbursement Parking & Maintenance Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Julie Reeder		Transaction ID: D2156 Date of Disbursement MM / DD / YYYY 01 / 20 / 2006
Mailing Address 750 North Rush Street No. 1405		Amount of Each Disbursement this Period 2500.00
City Chicago State IL Zip Code 60611	Purpose of Disbursement Fundraising Consulting Services 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Julie Reeder		Transaction ID: D2154 Date of Disbursement MM / DD / YYYY 02 / 02 / 2006
Mailing Address 750 North Rush Street No. 1405		Amount of Each Disbursement this Period 426.46
City Chicago State IL Zip Code 60611	Purpose of Disbursement Office Equipment & Travel 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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4195.73
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Julie Reeder		Transaction ID: D2157 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6
Mailing Address 750 North Rush Street No. 1405		Amount of Each Disbursement this Period 2500.00
City Chicago State IL Zip Code 60611		
Purpose of Disbursement Fundraising Consulting Services Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Julie Reeder		Transaction ID: D2155 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 750 North Rush Street No. 1405		Amount of Each Disbursement this Period 246.07
City Chicago State IL Zip Code 60611		
Purpose of Disbursement Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Julie Reeder		Transaction ID: D2158 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 750 North Rush Street No. 1405		Amount of Each Disbursement this Period 2500.00
City Chicago State IL Zip Code 60611		
Purpose of Disbursement Fundraising Consulting Services Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	5246.07
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)
All America PAC

A. David Rozmanich Full Name (Last, First, Middle Initial) Mailing Address 23 Gleneagles Drive City Schererville State IN Zip Code 46375 Purpose of Disbursement Reimbursement-Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D2142 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6 Amount of Each Disbursement this Period 353.06 Category/Type
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B. Joseph F. Savage, Jr. Full Name (Last, First, Middle Initial) Mailing Address 2 Agassiz Park City Jamaica Plain State MA Zip Code 02130 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D2185 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6 Amount of Each Disbursement this Period 299.93 * in-kind received Category/Type
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C. Marc D. Schloss Full Name (Last, First, Middle Initial) Mailing Address 450 Massachusetts Avenue, NW Apartment 407 City Washington State DC Zip Code 20001 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D2067 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period 975.99 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1628.98
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
All America PAC

Full Name (Last, First, Middle Initial) A. Marc D. Schloss		Transaction ID: D2068 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 450 Massachusetts Avenue, NW Apartment 407		Amount of Each Disbursement this Period 975.99
City Washington State DC Zip Code 20001	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Marc D. Schloss		Transaction ID: D2029 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 450 Massachusetts Avenue, NW Apartment 407		Amount of Each Disbursement this Period 975.99
City Washington State DC Zip Code 20001	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christopher D. Smith		Transaction ID: D2137 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 198.59
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Reimbursement-Travel & Postage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2150.57
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)

PAGE 101 / 156

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Christopher D. Smith		Transaction ID: D2138 Date of Disbursement 01 / 11 / 2006
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 99.90
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Reimbursement-Postage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Christopher D. Smith		Transaction ID: D1819 Date of Disbursement 01 / 13 / 2006
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 1167.19
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christopher D. Smith		Transaction ID: D2046 Date of Disbursement 01 / 31 / 2006
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 1167.19
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2434.28
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Christopher D. Smith		Transaction ID: D1829 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 1167.19
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Christopher D. Smith		Transaction ID: D2047 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 1167.19
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christopher D. Smith		Transaction ID: D2139 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 463.96
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Reimbursement-Office Equipment, Supplies	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2798.34
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Christopher D. Smith		Transaction ID: D2048 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 1167.19
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Christopher D. Smith		Transaction ID: D2030 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 1167.19
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sonic One Strategies, Inc.		Transaction ID: D2105 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 1637 NW 100th Drive		Amount of Each Disbursement this Period 633.15
City Coral Springs State FL Zip Code 33071	Purpose of Disbursement Telephone Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2967.53
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Squier Knapp & Dunn Communications, Inc.		Transaction ID: D2176 Date of Disbursement 02 / 02 / 2006
Mailing Address 1818 N Street, NW Suite 450		Amount of Each Disbursement this Period 8172.86
City Washington	State DC Zip Code 20036	
Purpose of Disbursement Communications Consulting & Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Thomas Sugar		Transaction ID: D1820 Date of Disbursement 01 / 13 / 2006
Mailing Address 4483 Thicket Trace		Amount of Each Disbursement this Period 844.57
City Zionsville	State IN Zip Code 46077	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Thomas Sugar		Transaction ID: D2180 Date of Disbursement 01 / 18 / 2006
Mailing Address 4483 Thicket Trace		Amount of Each Disbursement this Period 17.46
City Zionsville	State IN Zip Code 46077	
Purpose of Disbursement Reimbursement-Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	9034.89
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Thomas Sugar		Transaction ID: D2181 Date of Disbursement																					
Mailing Address 4483 Thicket Trace		<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>1</td><td></td><td>1</td><td>8</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	1		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		1	8		2	0	0	6														
City Zionsville	State IN	Zip Code 46077	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement-Travel		Category/ Type	20.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. Thomas Sugar		Transaction ID: D2112 Date of Disbursement																					
Mailing Address 4483 Thicket Trace		<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>1</td><td></td><td>3</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	1		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	1		2	0	0	6														
City Zionsville	State IN	Zip Code 46077	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll		Category/ Type	844.57																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. Thomas Sugar		Transaction ID: D1830 Date of Disbursement																					
Mailing Address 4483 Thicket Trace		<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>2</td><td></td><td>1</td><td>5</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	2		1	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	5		2	0	0	6														
City Zionsville	State IN	Zip Code 46077	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll		Category/ Type	844.57																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	1709.14
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Thomas Sugar		Transaction ID: D2113 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 4483 Thicket Trace		Amount of Each Disbursement this Period 844.57
City Zionsville State IN Zip Code 46077	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Thomas Sugar		Transaction ID: D2114 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 4483 Thicket Trace		Amount of Each Disbursement this Period 844.57
City Zionsville State IN Zip Code 46077	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Thomas Sugar		Transaction ID: D2031 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 4483 Thicket Trace		Amount of Each Disbursement this Period 844.57
City Zionsville State IN Zip Code 46077	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2533.71
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)
All America PAC

Full Name (Last, First, Middle Initial) A. Stephanie C. Sutton		Transaction ID: D1821 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6
Mailing Address 6711 Velasco Avenue		Amount of Each Disbursement this Period 423.21
City Dallas State TX Zip Code 75214	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Stephanie C. Sutton		Transaction ID: D2109 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 6711 Velasco Avenue		Amount of Each Disbursement this Period 423.21
City Dallas State TX Zip Code 75214	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Stephanie C. Sutton		Transaction ID: D1831 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 6711 Velasco Avenue		Amount of Each Disbursement this Period 423.21
City Dallas State TX Zip Code 75214	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1269.63
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)
All America PAC

Full Name (Last, First, Middle Initial) A. Stephanie C. Sutton		Transaction ID: D2110 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 6711 Velasco Avenue		Amount of Each Disbursement this Period 423.21
City Dallas State TX Zip Code 75214	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Stephanie C. Sutton		Transaction ID: D2177 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 6711 Velasco Avenue		Amount of Each Disbursement this Period 92.57
City Dallas State TX Zip Code 75214	Purpose of Disbursement Reimbursement-Shipping	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Stephanie C. Sutton		Transaction ID: D2111 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 6711 Velasco Avenue		Amount of Each Disbursement this Period 423.21
City Dallas State TX Zip Code 75214	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

938.99

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 109 / 156

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. Stephanie C. Sutton		Transaction ID: D2032 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 6711 Velasco Avenue		Amount of Each Disbursement this Period 423.21
City Dallas State TX Zip Code 75214	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SVP, LLC		Transaction ID: D2178 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 5600 General Washington Drive Suite B-202		Amount of Each Disbursement this Period 319.60
City Alexandria State VA Zip Code 22312	Purpose of Disbursement Webhosting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tomorrow's Strategies		Transaction ID: D2115 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 0 6
Mailing Address 1428 West Avenue		Amount of Each Disbursement this Period 1017.50
City Miami State FL Zip Code 33139	Purpose of Disbursement Fundraising Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1760.31
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)
All America PAC

Full Name (Last, First, Middle Initial) A. United Parcel Service		Transaction ID: D2116 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 181.34
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Overnight Service Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. United Parcel Service		Transaction ID: D2117 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 50.57
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Overnight Service Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. United Parcel Service		Transaction ID: D2118 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 243.20
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Overnight Service Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	475.11
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)
All America PAC

Full Name (Last, First, Middle Initial) A. United Parcel Service		Transaction ID: D2119 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 202.57
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Overnight Service	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D2121 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 515.03
City Baltimore State MD Zip Code 21297	Purpose of Disbursement Telephone Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: D2120 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 489.28
City Baltimore State MD Zip Code 21297	Purpose of Disbursement Telephone Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1206.88
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: D2122 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 34.37
City Baltimore State MD Zip Code 21297	Purpose of Disbursement Telephone Services 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Dan Weinstein		Transaction ID: D1839 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address 9532 Cresta Drive		Amount of Each Disbursement this Period 343.90
City Los Angeles State CA Zip Code 90035	Purpose of Disbursement Food for Event 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) ▼	* in-kind received

Full Name (Last, First, Middle Initial) C. Cary B. Young		Transaction ID: D2045 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address 2 Lord Fairfax Drive		Amount of Each Disbursement this Period 211.50
City Fredericksbg State VA Zip Code 22405	Purpose of Disbursement Janitorial Services 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) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	589.77
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. National Bank of Indianapolis		Transaction ID: D1843 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 3928.75
City Indianapolis State IN Zip Code 46204	Category/ Type	
Purpose of Disbursement Credit Card Payment, See Below		
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. American Trans Air		Transaction ID: D1860 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address National Airport		Amount of Each Disbursement this Period 96.90
City Washington State DC Zip Code 20000	Category/ Type	
Purpose of Disbursement Travel		
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) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Amtrak		Transaction ID: D1853 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 336.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Travel		
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) ▼	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	3928.75
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Amtrak		Transaction ID: D1850 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 116.00 [MEMO ITEM]
City Washington State DC Zip Code 20002		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Amtrak		Transaction ID: D1852 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6	
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 320.00 [MEMO ITEM]	
City Washington State DC Zip Code 20002			
Purpose of Disbursement Travel Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Amtrak		Transaction ID: D1851 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6	
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 320.00 [MEMO ITEM]	
City Washington State DC Zip Code 20002			
Purpose of Disbursement Travel Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Carroll Travel		Transaction ID: D1849 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 295.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Agent Fee		Category/ Type
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. Cingular Wireless		Transaction ID: D1859 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 17356		Amount of Each Disbursement this Period 594.80
City Baltimore State MD Zip Code 21297	[MEMO ITEM]	
Purpose of Disbursement Telephone Service		Category/ Type
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) C. Deer Park		Transaction ID: D1857 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 52271		Amount of Each Disbursement this Period 26.47
City Phoenix State AZ Zip Code 85072	[MEMO ITEM]	
Purpose of Disbursement Office Expense		Category/ Type
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) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Deer Park		Transaction ID: D1858 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 52271		Amount of Each Disbursement this Period 59.39
City Phoenix State AZ Zip Code 85072	[MEMO ITEM]	
Purpose of Disbursement Office Expense Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Transaction ID: D1854 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 287.70
City Atlanta State GA Zip Code 30320	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Delta Airlines		Transaction ID: D1855 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 140.20
City Atlanta State GA Zip Code 30320	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Loews Regency Hotel		Transaction ID: D1848 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 540 Park Avenue		Amount of Each Disbursement this Period 148.93
City New York State NY Zip Code 10021	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Transaction ID: D1856 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 1555 K Street, NW		Amount of Each Disbursement this Period 346.40
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. US Airways		Transaction ID: D1844 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address One Aviation Circle		Amount of Each Disbursement this Period 40.20
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

A. US Airways

Full Name (Last, First, Middle Initial)

Mailing Address One Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D1845
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	0	6

Amount of Each Disbursement this Period

349.20

[MEMO ITEM]

B. National Bank of Indianapolis

Full Name (Last, First, Middle Initial)

Mailing Address 107 North Pennsylvania Street Suite 700

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement Credit Card Payment, See Below

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D1861
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

Amount of Each Disbursement this Period

6248.19

C. 701 Restaurant

Full Name (Last, First, Middle Initial)

Mailing Address 701 Pennsylvania Avenue, N.W.

City Washington State DC Zip Code 20004

Purpose of Disbursement Catering

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D1864
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

Amount of Each Disbursement this Period

392.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

6248.19

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

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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)
All America PAC

Full Name (Last, First, Middle Initial) A. Capital Cafe & Salad Bar		Transaction ID: D1879 Date of Disbursement MM / DD / YYYY 03 / 14 / 2006
Mailing Address 101 Constitution Avenue, N.W.		Amount of Each Disbursement this Period 95.37
City Washington State DC Zip Code 20001	Purpose of Disbursement Meals Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Carroll Travel		Transaction ID: D1866 Date of Disbursement MM / DD / YYYY 03 / 14 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 25.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Travel Agent Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Comcast		Transaction ID: D1883 Date of Disbursement MM / DD / YYYY 03 / 14 / 2006
Mailing Address 900 Michigan Avenue, NE		Amount of Each Disbursement this Period 573.46
City Washington State DC Zip Code 20017	Purpose of Disbursement Cable Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Deer Park		Transaction ID: D1863 Date of Disbursement MM / DD / YYYY 03 / 14 / 2006
Mailing Address P.O. Box 52271		Amount of Each Disbursement this Period 70.75
City Phoenix	State AZ Zip Code 85072	
Purpose of Disbursement Office Expense		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Deer Park		Transaction ID: D1862 Date of Disbursement MM / DD / YYYY 03 / 14 / 2006
Mailing Address P.O. Box 52271		Amount of Each Disbursement this Period 96.57
City Phoenix	State AZ Zip Code 85072	
Purpose of Disbursement Office Expense		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Loews Regency Hotel		Transaction ID: D1880 Date of Disbursement MM / DD / YYYY 03 / 14 / 2006
Mailing Address 540 Park Avenue		Amount of Each Disbursement this Period 1571.54
City New York	State NY Zip Code 10021	
Purpose of Disbursement Catering & Room Rental		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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:
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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)
All America PAC

Full Name (Last, First, Middle Initial) A. National Journal Group, Inc.		Transaction ID: D1867 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 600 New Hampshire Avenue, N.W.		Amount of Each Disbursement this Period 232.99 [MEMO ITEM]
City Washington State DC Zip Code 20037		
Purpose of Disbursement Reference Materials Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. United Airlines		Transaction ID: D1868 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 1555 K Street, NW		Amount of Each Disbursement this Period 1609.60 [MEMO ITEM]
City Washington State DC Zip Code 20002		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. National Bank of Indianapolis		Transaction ID: D1885 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 7494.84 [MEMO ITEM]
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Credit Card Payment, See Below Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7494.84
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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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)
All America PAC

Full Name (Last, First, Middle Initial) A. American Airlines		Transaction ID: D1915 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address National Airport		Amount of Each Disbursement this Period 569.40
City Washington State DC Zip Code 20000	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Airlines		Transaction ID: D1916 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address National Airport		Amount of Each Disbursement this Period 176.90
City Washington State DC Zip Code 20000	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Trans Air		Transaction ID: D1909 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address National Airport		Amount of Each Disbursement this Period 166.90
City Washington State DC Zip Code 20000	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. American Trans Air		Transaction ID: D1910 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address National Airport		Amount of Each Disbursement this Period 550.00 [MEMO ITEM]
City Washington State DC Zip Code 20000		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Trans Air		Transaction ID: D1908 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address National Airport		Amount of Each Disbursement this Period 166.90 [MEMO ITEM]
City Washington State DC Zip Code 20000		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Trans Air		Transaction ID: D1911 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address National Airport		Amount of Each Disbursement this Period 175.60 [MEMO ITEM]
City Washington State DC Zip Code 20000		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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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)
All America PAC

A. Amtrak Full Name (Last, First, Middle Initial) Mailing Address 50 Massachusetts Avenue, NE City Washington State DC Zip Code 20002 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1912 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 15.80 [MEMO ITEM]
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B. Carroll Travel Full Name (Last, First, Middle Initial) Mailing Address 201 Massachusetts Avenue, NE City Washington State DC Zip Code 20002 Purpose of Disbursement Travel Agent Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1914 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 50.00 [MEMO ITEM]
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C. Delta Airlines Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 20706 City Atlanta State GA Zip Code 30320 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1903 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 289.20 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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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)
All America PAC

A. Delta Airlines Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 20706 City Atlanta State GA Zip Code 30320 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1902 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 289.20 [MEMO ITEM]
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B. Digby's Cafe Full Name (Last, First, Middle Initial) Mailing Address 666 Fifth Avenue City New York State NY Zip Code 10103 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1905 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 578.66 [MEMO ITEM]
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C. FedEx Kinko's Full Name (Last, First, Middle Initial) Mailing Address 13155 Noel Road Suite 1600 City Dallas State TX Zip Code 75240 Purpose of Disbursement Copying Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1897 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 728.62 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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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)
All America PAC

Full Name (Last, First, Middle Initial) A. FedEx Kinko's		Transaction ID: D1898 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 13155 Noel Road Suite 1600		Amount of Each Disbursement this Period 7.10 [MEMO ITEM]
City Dallas State TX Zip Code 75240		
Purpose of Disbursement Copying Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FedEx Kinko's		Transaction ID: D1899 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 13155 Noel Road Suite 1600		Amount of Each Disbursement this Period 130.96 [MEMO ITEM]
City Dallas State TX Zip Code 75240		
Purpose of Disbursement Copying Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FedEx Kinko's		Transaction ID: D1900 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 13155 Noel Road Suite 1600		Amount of Each Disbursement this Period 27.47 [MEMO ITEM]
City Dallas State TX Zip Code 75240		
Purpose of Disbursement Copying Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Loews Regency Hotel		Transaction ID: D1896 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 540 Park Avenue		Amount of Each Disbursement this Period 300.00
City New York State NY Zip Code 10021	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. National Bank of Indianapolis		Transaction ID: D1886 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 485.18
City Indianapolis State IN Zip Code 46204	[MEMO ITEM]	
Purpose of Disbursement Bank Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. National Bank of Indianapolis		Transaction ID: D1887 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 442.07
City Indianapolis State IN Zip Code 46204	[MEMO ITEM]	
Purpose of Disbursement Bank Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
All America PAC

Full Name (Last, First, Middle Initial) A. National Bank of Indianapolis		Transaction ID: D1888 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 411.25
City Indianapolis State IN Zip Code 46204	[MEMO ITEM]	
Purpose of Disbursement Bank Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Northwest Airlines		Transaction ID: D1907 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 901 15th Street, NW		Amount of Each Disbursement this Period 216.90
City Washington State DC Zip Code 20005	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: D1901 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 46.74
City Framingham State MA Zip Code 01702	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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:
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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)
All America PAC

Full Name (Last, First, Middle Initial) A. Transamerica Limo		Transaction ID: D1890 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 164 Westervelt Place		Amount of Each Disbursement this Period 217.00
City Lodi State NJ Zip Code 07644	Purpose of Disbursement Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Transamerica Limo		Transaction ID: D1891 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 164 Westervelt Place		Amount of Each Disbursement this Period 123.00
City Lodi State NJ Zip Code 07644	Purpose of Disbursement Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Transamerica Limo		Transaction ID: D1892 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 164 Westervelt Place		Amount of Each Disbursement this Period 367.50
City Lodi State NJ Zip Code 07644	Purpose of Disbursement Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Triserve Party Rentals		Transaction ID: D1913 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 2350 Lafayette Avenue		Amount of Each Disbursement this Period 640.23
City Bronx State NY Zip Code 10473	[MEMO ITEM]	
Purpose of Disbursement Event Rental Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. National Bank of Indianapolis		Transaction ID: D1917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 8640.90
City Indianapolis State IN Zip Code 46204	[MEMO ITEM]	
Purpose of Disbursement Credit Card Payment, See Below Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Amtrak		Transaction ID: D1946 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 42.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	8640.90
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Cafe Di Scala		Transaction ID: D1923 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 644 18th Street		Amount of Each Disbursement this Period 608.00
City Des Moines State IA Zip Code 50314	[MEMO ITEM]	
Purpose of Disbursement Catering Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Capital Cafe & Salad Bar		Transaction ID: D1927 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 101 Constitution Avenue, N.W.		Amount of Each Disbursement this Period 172.87
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Carroll Travel		Transaction ID: D1920 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 150.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Agent Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. CompUSA		Transaction ID: D1931 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 5901 Stevenson Avenue		Amount of Each Disbursement this Period 414.70
City Alexandria State VA Zip Code 22304	[MEMO ITEM]	
Purpose of Disbursement Office Equipment Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Computer Show.com		Transaction ID: D1933 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 4114 North Pecos Road Suite 102		Amount of Each Disbursement this Period 424.00
City Las Vegas State NV Zip Code 89115	[MEMO ITEM]	
Purpose of Disbursement Office Equipment Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Continental Airlines		Transaction ID: D1922 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 1625 L Street NW		Amount of Each Disbursement this Period 329.40
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

A. Emmis Books Full Name (Last, First, Middle Initial) Mailing Address 193 Edward Drive City Jackson State TN Zip Code Purpose of Disbursement Gifts for Donors Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1947 Date of Disbursement 03 / 14 / 2006 Amount of Each Disbursement this Period 307.54 [MEMO ITEM]
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B. Enterprise Rent-a-Car Full Name (Last, First, Middle Initial) Mailing Address City St. Louis State MO Zip Code Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1939 Date of Disbursement 03 / 14 / 2006 Amount of Each Disbursement this Period 225.13 [MEMO ITEM]
---	--	---

C. FedEx Kinko's Full Name (Last, First, Middle Initial) Mailing Address 13155 Noel Road Suite 1600 City Dallas State TX Zip Code 75240 Purpose of Disbursement Copying Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1944 Date of Disbursement 03 / 14 / 2006 Amount of Each Disbursement this Period 78.87 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Four Points Hotel		Transaction ID: D1932 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 55 John Devine Drive		Amount of Each Disbursement this Period 198.72 [MEMO ITEM]
City Manchester State NH Zip Code 03103		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Four Points Hotel		Transaction ID: D1941 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6	
Mailing Address 55 John Devine Drive		Amount of Each Disbursement this Period 117.72 [MEMO ITEM]	
City Manchester State NH Zip Code 03103			
Purpose of Disbursement Travel Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Merchants Rent-a-Car		Transaction ID: D1938 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6	
Mailing Address 1180 Hooksett Road		Amount of Each Disbursement this Period 554.86 [MEMO ITEM]	
City Hooksett State NH Zip Code 03106			
Purpose of Disbursement Travel Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)
All America PAC

Full Name (Last, First, Middle Initial) A. Radisson Hotels		Transaction ID: D1942 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 11340 Blondo Street		Amount of Each Disbursement this Period 263.50
City Omaha State NE Zip Code 68164	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Radisson Hotels		Transaction ID: D1943 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 11340 Blondo Street		Amount of Each Disbursement this Period 304.24
City Omaha State NE Zip Code 68164	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Southwest Airlines		Transaction ID: D1928 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 200.90
City Glen Burnie State MD Zip Code 21061	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Transaction ID: D1935 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 40.00 [MEMO ITEM]
City State Zip Code Glen Burnie MD 21061		
Purpose of Disbursement Travel	Category/ Type	
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. Southwest Airlines		Transaction ID: D1929 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 185.90 [MEMO ITEM]
City State Zip Code Glen Burnie MD 21061		
Purpose of Disbursement Travel	Category/ Type	
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) C. Southwest Airlines		Transaction ID: D1930 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 185.90 [MEMO ITEM]
City State Zip Code Glen Burnie MD 21061		
Purpose of Disbursement Travel	Category/ Type	
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) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. United Parcel Service		Transaction ID: D1924 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 191.10 [MEMO ITEM]
City Philadelphia State PA Zip Code 19170		
Purpose of Disbursement Overnight Service Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. National Bank of Indianapolis		Transaction ID: D1950 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 7166.18 [MEMO ITEM]
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Credit Card Payment, See Below Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carroll Travel		Transaction ID: D1963 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 50.00 [MEMO ITEM]
City Washington State DC Zip Code 20002		
Purpose of Disbursement Travel Agent Fee Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7166.18
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)
All America PAC

Full Name (Last, First, Middle Initial) A. Delta Airlines		Transaction ID: D1968 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 529.20 [MEMO ITEM]
City Atlanta State GA Zip Code 30320		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hotel At Gateway Center		Transaction ID: D1962 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 2100 Green Hills Drive		Amount of Each Disbursement this Period 154.56 [MEMO ITEM]
City Ames State IA Zip Code 50010		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hotel Crescent Court		Transaction ID: D1972 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 400 Crescent Court		Amount of Each Disbursement this Period 303.44 [MEMO ITEM]
City Dallas State TX Zip Code 75201		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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:
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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)
All America PAC

Full Name (Last, First, Middle Initial) A. Hotel Fort Des Moine		Transaction ID: D1961 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 1000 Walnut Street		Amount of Each Disbursement this Period 466.49 [MEMO ITEM]
City Des Moines State IA Zip Code 50309		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Monocle		Transaction ID: D1973 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 107 D Street, NE		Amount of Each Disbursement this Period 82.39 [MEMO ITEM]
City Washington State DC Zip Code 20002		
Purpose of Disbursement Meals Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. National Bank of Indianapolis		Transaction ID: D1951 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 442.07 [MEMO ITEM]
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Bank Fee Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Radisson Hotels		Transaction ID: D1954 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 11340 Blondo Street		Amount of Each Disbursement this Period 1006.66
City Omaha State NE Zip Code 68164	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Radisson Hotels		Transaction ID: D1955 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 11340 Blondo Street		Amount of Each Disbursement this Period 3095.55
City Omaha State NE Zip Code 68164	[MEMO ITEM]	
Purpose of Disbursement Catering Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Radisson Hotels		Transaction ID: D1969 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 11340 Blondo Street		Amount of Each Disbursement this Period 41.82
City Omaha State NE Zip Code 68164	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Transaction ID: D1967 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 104.70 [MEMO ITEM]
City State Zip Code Glen Burnie MD 21061		
Purpose of Disbursement Travel	Category/ Type	
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. Staples		Transaction ID: D1956 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 30.56 [MEMO ITEM]
City State Zip Code Framingham MA 01702		
Purpose of Disbursement Office Supplies	Category/ Type	
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) C. United Airlines		Transaction ID: D1964 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 1555 K Street, NW		Amount of Each Disbursement this Period 207.70 [MEMO ITEM]
City State Zip Code Washington DC 20002		
Purpose of Disbursement Travel	Category/ Type	
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) ▶	0.00
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)

<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)
All America PAC

Full Name (Last, First, Middle Initial) A. United Parcel Service		Transaction ID: D1959 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 100.41
City Philadelphia State PA Zip Code 19170	[MEMO ITEM]	
Purpose of Disbursement Overnight Service Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Hotel Crescent Court		Transaction ID: D1884 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 400 Crescent Court		Amount of Each Disbursement this Period 365.90
City Dallas State TX Zip Code 75201	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. National Bank of Indianapolis		Transaction ID: D1974 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 11734.11
City Indianapolis State IN Zip Code 46204	[MEMO ITEM]	
Purpose of Disbursement Credit Card Payment, See Below Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	11734.11
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
All America PAC

Full Name (Last, First, Middle Initial) A. Amtrak		Transaction ID: D2017 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 157.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Amtrak		Transaction ID: D2016 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 128.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Amtrak		Transaction ID: D1980 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 320.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. Capital Cafe & Salad Bar		Transaction ID: D1976 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 101 Constitution Avenue, N.W.		Amount of Each Disbursement this Period 525.11
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Catering Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Carroll Travel		Transaction ID: D1981 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 280.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Agent Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Cingular Wireless		Transaction ID: D2011 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 17356		Amount of Each Disbursement this Period 513.29
City Baltimore State MD Zip Code 21297	[MEMO ITEM]	
Purpose of Disbursement Telephone Service Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. FedEx Kinko's		Transaction ID: D1979 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 13155 Noel Road Suite 1600		Amount of Each Disbursement this Period 1378.81
City Dallas State TX Zip Code 75240	[MEMO ITEM]	
Purpose of Disbursement Copying Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. FedEx Kinko's		Transaction ID: D1999 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 13155 Noel Road Suite 1600		Amount of Each Disbursement this Period 9.78
City Dallas State TX Zip Code 75240	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Hotel At Gateway Center		Transaction ID: D1988 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 2100 Green Hills Drive		Amount of Each Disbursement this Period 231.84
City Ames State IA Zip Code 50010	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
All America PAC

Full Name (Last, First, Middle Initial) A. La Brasserie		Transaction ID: D2006 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 239 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 443.82 [MEMO ITEM]
City Washington State DC Zip Code 20002		
Purpose of Disbursement Catering Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. La Colline		Transaction ID: D2014 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 400 North Capitol Street, N.W.		Amount of Each Disbursement this Period 342.50 [MEMO ITEM]
City Washington State DC Zip Code 20001		
Purpose of Disbursement Catering Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Monocle		Transaction ID: D1990 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 107 D Street, NE		Amount of Each Disbursement this Period 542.21 [MEMO ITEM]
City Washington State DC Zip Code 20002		
Purpose of Disbursement Catering Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)
All America PAC

A. Monocle

Full Name (Last, First, Middle Initial)
Mailing Address 107 D Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Catering

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D2018
Date of Disbursement
01 / 27 / 2006

Amount of Each Disbursement this Period
1013.65

[MEMO ITEM]

B. New Hampshire Political Library

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 2512

City Concord State NH Zip Code 03302

Purpose of Disbursement Gifts for Supporters

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D1977
Date of Disbursement
01 / 27 / 2006

Amount of Each Disbursement this Period
375.00

[MEMO ITEM]

C. Northwest Airlines

Full Name (Last, First, Middle Initial)
Mailing Address 901 15th Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D1985
Date of Disbursement
01 / 27 / 2006

Amount of Each Disbursement this Period
476.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
All America PAC

Full Name (Last, First, Middle Initial) A. Northwest Airlines		Transaction ID: D1984 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 901 15th Street, NW		Amount of Each Disbursement this Period 374.20 [MEMO ITEM]
City Washington State DC Zip Code 20005		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Northwest Airlines		Transaction ID: D1983 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6	
Mailing Address 901 15th Street, NW		Amount of Each Disbursement this Period 374.20 [MEMO ITEM]	
City Washington State DC Zip Code 20005			
Purpose of Disbursement Travel Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Omni Hotels Parker House		Transaction ID: D2012 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6	
Mailing Address 60 School Street		Amount of Each Disbursement this Period 315.56 [MEMO ITEM]	
City Boston State MA Zip Code 02108			
Purpose of Disbursement Travel Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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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)
All America PAC

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Transaction ID: D2001 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 210.90
City State Zip Code Glen Burnie MD 21061	[MEMO ITEM]	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: D1978 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 465.29
City State Zip Code Framingham MA 01702	[MEMO ITEM]	
Purpose of Disbursement Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: D2005 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 130.89
City State Zip Code Framingham MA 01702	[MEMO ITEM]	
Purpose of Disbursement Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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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)
All America PAC

Full Name (Last, First, Middle Initial) A. The BusBank		Transaction ID: D1993 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 155 North Wacker Drive Suite 620		Amount of Each Disbursement this Period 1037.65
City Chicago State IL Zip Code 60606	[MEMO ITEM]	
Purpose of Disbursement Transportation Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. The BusBank		Transaction ID: D1994 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 155 North Wacker Drive Suite 620		Amount of Each Disbursement this Period 109.25
City Chicago State IL Zip Code 60606	[MEMO ITEM]	
Purpose of Disbursement Transportation Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. United Airlines		Transaction ID: D1996 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 6
Mailing Address 1555 K Street, NW		Amount of Each Disbursement this Period 246.90
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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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)
All America PAC

A. United Airlines

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 1555 K Street, NW

City Washington State DC Zip Code 20002

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D1997
Date of Disbursement
01 / 27 / 2006

Amount of Each Disbursement this Period
246.90

[MEMO ITEM]

B. United Parcel Service

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement Overnight Service

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D1975
Date of Disbursement
01 / 27 / 2006

Amount of Each Disbursement this Period
8.15

[MEMO ITEM]

C. US Airways

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address One Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D2010
Date of Disbursement
01 / 27 / 2006

Amount of Each Disbursement this Period
253.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

255676.79

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)
All America PAC

Full Name (Last, First, Middle Initial) A. Congressional Black Caucus PAC		Transaction ID: D1835 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 509 C Street NE		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement 2006 Contribution 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Democratic Senatorial Campaign Committee		Transaction ID: D1833 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 120 Maryland Avenue, N.E.		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement 2006 Contribution 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Paul Hodes For Congress		Transaction ID: D2165 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 26 South Main Street		Amount of Each Disbursement this Period 500.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Contribution Candidate Name Paul Hodes	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	20500.00
TOTAL This Period (last page this line number only) ▶	20500.00

**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 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
All America PAC

A. Full Name (Last, First, Middle Initial)
Roche Inc. Good Government Fund

Mailing Address 340 Kingsland Street

City Nutley State NJ Zip Code 07110

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: D2174

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	2500.00

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 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)
All America PAC

Full Name (Last, First, Middle Initial) A. Burling 06		Transaction ID: D2175 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6	
Mailing Address 20 Lang Road		Amount of Each Disbursement this Period 250.00	
City Cornish State NH Zip Code 03745	Purpose of Disbursement Nonfederal Contribution Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Committee To Elect House Democrats		Transaction ID: D2140 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6	
Mailing Address P.O. Box 1292		Amount of Each Disbursement this Period 500.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DeVries 2006		Transaction ID: D2144 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6	
Mailing Address 16 Old Orchard Way		Amount of Each Disbursement this Period 1000.00	
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial) A. Franklin City Democrats		Transaction ID: D2146 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 211 Carver Street		Amount of Each Disbursement this Period 250.00
City Franklin State NH Zip Code 03235	Purpose of Disbursement Nonfederal Contribution 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Mitch Landrieu for Mayor		Transaction ID: D1834 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 1100 Poydras Street Suite 2950, Unit 20		Amount of Each Disbursement this Period 1000.00
City New Orleans State LA Zip Code 70163	Purpose of Disbursement Nonfederal Contribution 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. New Hampshire Democrats Senate Caucus		Transaction ID: D2164 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 2 1/2 Beacon Street		Amount of Each Disbursement this Period 1000.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution 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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
All America PAC

Full Name (Last, First, Middle Initial)

A. Portsmouth Democrats

Mailing Address 195 Hillside Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D2168

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)