

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

ADDRESS (number and street) PO BOX 77089 WASHINGTON DC 20013

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00338848 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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

5. Covering Period 01 01 2005 through 06 30 2005

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

Type or Print Name of Treasurer Mrs. Chantal Wienecke

Signature of Treasurer Electronically Filed by Mrs. Chantal Wienecke Date 04 09 2009

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

Table with 10 columns and 1 row, labeled 'Office Use Only' in the first column.

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

	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>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		47630.72
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	47630.72									
(c) Total Receipts (from Line 19)	96800.00	96800.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	144430.72	144430.72								
7. Total Disbursements (from Line 31)	72000.00	72000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	72430.72	72430.72								
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
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

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	85800.00	85800.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	85800.00	85800.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	11000.00	11000.00
(c) Other Political Committees (such as PACs)	96800.00	96800.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	96800.00	96800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	96800.00	96800.00

DETAILED SUMMARY PAGE

of Disbursements

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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.....	29000.00	29000.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	29000.00	29000.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	43000.00	43000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
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))..	72000.00	72000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	72000.00	72000.00

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	96800.00	96800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	96800.00	96800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	29000.00	29000.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	29000.00	29000.00

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

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

FOR LINE NUMBER: PAGE 6 / 30
(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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A. Full Name (Last, First, Middle Initial)
Douglas Barnhardt

Mailing Address Box 667

City Poway State CA Zip Code 92074

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

Name of Employer n/a Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 11 / 2005
Transaction ID: SA11AI.4232
 Amount of Each Receipt this Period: 5000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Nancy Barnhart

Mailing Address Box 667

City Poway State CA Zip Code 92074

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 11 / 2005
Transaction ID: SA11AI.4234
 Amount of Each Receipt this Period: 5000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Kevin Binger

Mailing Address 12910 Creamery Hill Drive

City Germantown State MD Zip Code 20874

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

Name of Employer n/a Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 16 / 2005
Transaction ID: SA11AI.4236
 Amount of Each Receipt this Period: 500.00
 Contribution

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A. Full Name (Last, First, Middle Initial)
Samuel Brunelli
Mailing Address 15462 Gulf Blvd.
City State Zip Code
Madeira Beach FL 33708
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation n/a
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00
Date of Receipt: 05 / 16 / 2005
Transaction ID: SA11AI.4238
Amount of Each Receipt this Period: 2000.00
Contribution

B. Full Name (Last, First, Middle Initial)
Oscar Cerna
Mailing Address 3 Grove Isle Dr.
City State Zip Code
Coconut Grove FL 33133
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 05 / 07 / 2005
Transaction ID: SA11AI.4240
Amount of Each Receipt this Period: 5000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Credit Union Legislative Action Council
Mailing Address 601 Pennsylvania Ave., NW
City State Zip Code
Washington DC 20004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 05 / 16 / 2005
Transaction ID: SA11AI.4242
Amount of Each Receipt this Period: 5000.00
Contribution

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)
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FOR LINE NUMBER: PAGE 8 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A. Full Name (Last, First, Middle Initial)
James Gartland
 Mailing Address 1508 W Overlock Rd
 City Marion State IN Zip Code 46952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00
 Date of Receipt 03 / 14 / 2005
Transaction ID: SA11AI.4244
 Amount of Each Receipt this Period 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
John Goodman
 Mailing Address 1107 Hazeltine Blvd Ste 200
 City Chaska State MN Zip Code 55318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00
 Date of Receipt 02 / 17 / 2005
Transaction ID: SA11AI.4245
 Amount of Each Receipt this Period 5000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Robert Grand
 Mailing Address 730 Williams Cove Dr
 City Indianapolis State IN Zip Code 46260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00
 Date of Receipt 03 / 07 / 2005
Transaction ID: SA11AI.4247
 Amount of Each Receipt this Period 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 7000.00
TOTAL This Period (last page this line number only) ►

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

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FOR LINE NUMBER: PAGE 9 / 30
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A. Full Name (Last, First, Middle Initial)
Edward Jolliffe

Mailing Address 8901 Otis Ave.

City Indianapolis State IN Zip Code 46216

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 16 / 2005
Transaction ID: SA11AI.4249
Amount of Each Receipt this Period 1000.00
Contribution

B. Full Name (Last, First, Middle Initial)
Jibil Kazeminy

Mailing Address 7803 Glenroy Rd. Ste. 300

City Edina State MN Zip Code 55439

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 16 / 2005
Transaction ID: SA11AI.4250
Amount of Each Receipt this Period 5000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Nader Kazeminy

Mailing Address 7803 Glenroy Rd. Ste. 300

City Edina State MN Zip Code 55439

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 16 / 2005
Transaction ID: SA11AI.4251
Amount of Each Receipt this Period 5000.00
Contribution

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)
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FOR LINE NUMBER: PAGE 10 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A. Full Name (Last, First, Middle Initial)
Nasser Kazeminy
Mailing Address 760 Island Drive
City State Zip Code
Palm Beach FL 33480
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 02 / 16 / 2005
Transaction ID: SA11AI.4252
Amount of Each Receipt this Period: 5000.00
Contribution

B. Full Name (Last, First, Middle Initial)
Yvonne Kazeminy
Mailing Address 760 Island Drive
City State Zip Code
Palm Beach FL 33480
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 02 / 16 / 2005
Transaction ID: SA11AI.4253
Amount of Each Receipt this Period: 5000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Charles Lanham
Mailing Address 7564 Silver Pine Court
City State Zip Code
Indianapolis IN 46250
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 03 / 01 / 2005
Transaction ID: SA11AI.4255
Amount of Each Receipt this Period: 1000.00
Contribution

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 30
(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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.

Full Name (Last, First, Middle Initial)
Jeffrey Levitz

Mailing Address 18136 Sentinel Circle

City State Zip Code
Boca Raton FL 33496

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2005

Transaction ID: SA11AI.4257

Amount of Each Receipt this Period
5000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Jeffrey Levitz

Mailing Address 18136 Sentinel Circle

City State Zip Code
Boca Raton FL 33496

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7100.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2005

Transaction ID: SA11AI.4258

Amount of Each Receipt this Period
2100.00

Contribution

C.

Full Name (Last, First, Middle Initial)
JAmes Matthews

Mailing Address 1101 N Baldwin Ave

City State Zip Code
Marion IN 46952

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2005

Transaction ID: SA11AI.4260

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **7600.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 30

(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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.

Full Name (Last, First, Middle Initial)
Michael Murphy

Mailing Address 4731 Moss Lane

City State Zip Code
Indianapolis IN 46237

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

Name of Employer Requested Occupation Requested

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

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.4262

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Lisa Ricciardi

Mailing Address 8200 University Drive

City State Zip Code
Tamarac FL 33321

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

Name of Employer Requested Occupation Requested

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

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.4264

Amount of Each Receipt this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Sal Ricciardi

Mailing Address 8200 University Dr.

City State Zip Code
Tamarac FL 33321

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2100.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.4266

Amount of Each Receipt this Period

2100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

8100.00

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A. Full Name (Last, First, Middle Initial)
Sal Ricciardi

Mailing Address 8200 University Dr.

City State Zip Code
Tamarac FL 33321

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.4267

Amount of Each Receipt this Period
2100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Douglas Rose

Mailing Address PO Box 90175

City State Zip Code
Indianapolis IN 46290

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.4269

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Douglas Rose

Mailing Address PO Box 90175

City State Zip Code
Indianapolis IN 46290

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 5

Transaction ID: SA11AI.4270

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **4100.00**

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 14 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A. Full Name (Last, First, Middle Initial)
Douglas Rose

Mailing Address PO Box 90175

City Indianapolis State IN Zip Code 46290

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 10 / 2005

Transaction ID: SA11AI.4271

Amount of Each Receipt this Period 1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Jeff Southworth

Mailing Address 3301 Wildwood Dr

City Marion State IN Zip Code 46952

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 07 / 2005

Transaction ID: SA11AI.4273

Amount of Each Receipt this Period 1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Roger Teran

Mailing Address 799 Crandon Blvd.

City Key Biscayne State FL Zip Code 33149

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 07 / 2005

Transaction ID: SA11AI.4275

Amount of Each Receipt this Period 500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A. Full Name (Last, First, Middle Initial)
Eric Walts

Mailing Address PO Box 408

City Marion State IN Zip Code 46952

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

Name of Employer n/a Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 13 / 2005
Transaction ID: SA11AI.4277
 Amount of Each Receipt this Period: 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Michael Weaver

Mailing Address 10671 Winterwood

City Carmel State IN Zip Code 46032

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 05 / 16 / 2005
Transaction ID: SA11AI.4279
 Amount of Each Receipt this Period: 2500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Rebecca Weaver

Mailing Address 10671 Winterwood

City Carmel State IN Zip Code 46032

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 05 / 16 / 2005
Transaction ID: SA11AI.4281
 Amount of Each Receipt this Period: 2500.00
 Contribution

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 30
	(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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.	Full Name (Last, First, Middle Initial) Maria Josefina Zamora		Date of Receipt
	Mailing Address 911 Harbor Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 07 / 2005
	City	State	Zip Code
	Key Biscayne	FL	33149
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
	Name of Employer Requested		Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 5000.00	
			Transaction ID: SA11AI.4283
			Amount of Each Receipt this Period <input type="text"/> 5000.00
			Contribution

B.	Full Name (Last, First, Middle Initial) Roberto Zamora		Date of Receipt
	Mailing Address 911 Harbor Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 07 / 2005
	City	State	Zip Code
	Key Biscayne	FL	33149
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
	Name of Employer Requested		Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1000.00	
			Transaction ID: SA11AI.4285
			Amount of Each Receipt this Period <input type="text"/> 1000.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 6000.00
TOTAL This Period (last page this line number only)	<input type="text"/> 85800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 30

(check only one)

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

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.

Full Name (Last, First, Middle Initial)
ACCENTURE PAC

Mailing Address 800 Connecticut Ave NW

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 5

Transaction ID: SA11C.4287

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
CONSECO INC CONCERNED CITIZENS POLITICAL ACTION COMMITTEE (PAC)

Mailing Address 11825 NORTH PENNSYLVANIA

City State Zip Code
CARMEL IN 46032

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

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
0 1 / 0 5 / 2 0 0 5

Transaction ID: SA11C.4289

Amount of Each Receipt this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
KNAUF POLYSTYRENE USA POLITICAL ACTION COMMITTEE LLC

Mailing Address 2725 HENKLE DRIVE

City State Zip Code
LEBANON OH 45036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 5

Transaction ID: SA11C.4291

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶

7000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 30
(check only one)

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

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A. Full Name (Last, First, Middle Initial)
MAGAZINE PUBLISHERS OF AMERICA PAC FKA MAGAZINE PUBLISHES ASSOCIATION PAC

Mailing Address 1211 CONNECTICUT AVENUE NW STE 610

City State Zip Code
WASHINGTON DC 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2005

Transaction ID: SA11C.4293

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
NATIONAL STAR ROUTE MAIL CONTRACTORS POLITICAL ACTION COMMITTEE

Mailing Address 324 East Capitol Street NE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2005

Transaction ID: SA11C.4295

Amount of Each Receipt this Period
2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
SBC COMMUNICATIONS INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (SBC EMPAC)

Mailing Address 175 E. Houston 7-A-50

City State Zip Code
San Antonio TX 78205

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2005

Transaction ID: SA11C.4297

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 4000.00

TOTAL This Period (last page this line number only) ► 11000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

<p>A. Full Name (Last, First, Middle Initial) Claudia Keller</p> <p>Mailing Address 806 N. Fairfax Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4298</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3400.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Claudia Keller</p> <p>Mailing Address 806 N. Fairfax Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4299</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3400.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Claudia Keller</p> <p>Mailing Address 806 N. Fairfax Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4300</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3400.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10200.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

<p>A. Full Name (Last, First, Middle Initial) Claudia Keller</p> <p>Mailing Address 806 N. Fairfax Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4301</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="3400.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Claudia Keller</p> <p>Mailing Address 806 N. Fairfax Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4302</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="3400.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Claudia Keller</p> <p>Mailing Address 806 N. Fairfax Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4303</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="3400.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10200.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mrs. Chantal Wienecke</p> <p>Mailing Address PO Box 77089</p> <p>City Washington State DC Zip Code 20013</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4304</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1200.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mrs. Chantal Wienecke</p> <p>Mailing Address PO Box 77089</p> <p>City Washington State DC Zip Code 20013</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4305</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1400.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mrs. Chantal Wienecke</p> <p>Mailing Address PO Box 77089</p> <p>City Washington State DC Zip Code 20013</p> <p>Purpose of Disbursement Administrative Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4306</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1800.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4400.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

**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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.	Full Name (Last, First, Middle Initial) Mrs. Chantal Wienecke	Transaction ID: SB21B.4307 Date of Disbursement 04 / 14 / 2005
	Mailing Address PO Box 77089	
	City Washington State DC Zip Code 20013	Amount of Each Disbursement this Period 800.00
	Purpose of Disbursement Administrative 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) ▼

B.	Full Name (Last, First, Middle Initial) Mrs. Chantal Wienecke	Transaction ID: SB21B.4308 Date of Disbursement 05 / 03 / 2005
	Mailing Address PO Box 77089	
	City Washington State DC Zip Code 20013	Amount of Each Disbursement this Period 1600.00
	Purpose of Disbursement Administrative 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) ▼

C.	Full Name (Last, First, Middle Initial) Mrs. Chantal Wienecke	Transaction ID: SB21B.4309 Date of Disbursement 05 / 26 / 2005
	Mailing Address PO Box 77089	
	City Washington State DC Zip Code 20013	Amount of Each Disbursement this Period 1800.00
	Purpose of Disbursement Administrative 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)	4200.00
TOTAL This Period (last page this line number only)	29000.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.	Full Name (Last, First, Middle Initial) AMERICANS FOR A REPUBLICAN MAJORITY POLITICAL ACTION COMMITTEE	Transaction ID: SB23.4311
	Mailing Address 1155 21st Street NW Suite 300	Date of Disbursement 03 / 02 / 2005
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Cassidy Event	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Bob BOB BEAUPREZ FOR CONGRESS	Transaction ID: SB23.4313
	Mailing Address PO Box 501	Date of Disbursement 03 / 17 / 2005
	City Wheat Ridge State CO Zip Code 80034	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) JR, CHARLES W. BOUSTANY	Transaction ID: SB23.4315
	Mailing Address 331 BEVERLY DRIVE	Date of Disbursement 06 / 23 / 2005
	City LAFAYETTE State LA Zip Code 70503	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.	Full Name (Last, First, Middle Initial) SHELLEY MOORE CAPITO	Transaction ID: SB23.4317 Date of Disbursement 06 / 23 / 2005
	Mailing Address 2 Comstock Place	Amount of Each Disbursement this Period 1000.00
	City Charleston State WV Zip Code 25314	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) J Christopher CHOCOLA FOR CONGRESS INC	Transaction ID: SB23.4319 Date of Disbursement 06 / 23 / 2005
	Mailing Address PO BOX 6728	Amount of Each Disbursement this Period 1000.00
	City SOUTH BEND State IN Zip Code 46660	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) CHARLES W DENT	Transaction ID: SB23.4321 Date of Disbursement 06 / 23 / 2005
	Mailing Address 3626 Evening Star Terrace	Amount of Each Disbursement this Period 1000.00
	City ALLENTOWN State PA Zip Code 18104	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2003 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional)	3000.00
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 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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.	Full Name (Last, First, Middle Initial) Michael FITZPATRICK FOR CONGRESS	Transaction ID: SB23.4323 Date of Disbursement 03 / 17 / 2005
	Mailing Address 115 North Broad Street	Amount of Each Disbursement this Period 1000.00
	City Doylestown State PA Zip Code 18901	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JEFF FORTENBERRY	Transaction ID: SB23.4325 Date of Disbursement 06 / 23 / 2005
	Mailing Address 1610 N. Street	Amount of Each Disbursement this Period 1000.00
	City Lincoln State NE Zip Code 68508	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dave FRIENDS OF DAVE REICHERT	Transaction ID: SB23.4327 Date of Disbursement 03 / 17 / 2005
	Mailing Address P. O. Box 53322	Amount of Each Disbursement this Period 1000.00
	City Bellevue State WA Zip Code 98015	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3000.00
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 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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

<p>A. Full Name (Last, First, Middle Initial) Mike FRIENDS OF MIKE SODREL</p> <p>Mailing Address 702 NORTH SHORE DRIVE SUITE 500</p> <p>City JEFFERSONVILLE State IN Zip Code 47130</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4329 Date of Disbursement 03 / 17 / 2005</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Robert HAYES FOR CONGRESS</p> <p>Mailing Address Post Office Box 2000</p> <p>City Concord State NC Zip Code 28026</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4331 Date of Disbursement 06 / 23 / 2005</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Jim JIM GERLACH FOR CONGRESS</p> <p>Mailing Address 911 Welsh Ayres Way</p> <p>City Downingtown State PA Zip Code 19335</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4333 Date of Disbursement 03 / 17 / 2005</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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 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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.	Full Name (Last, First, Middle Initial) John KUHL FOR CONGRESS Mailing Address 10 GANESVOORT STREET City BATH State NY Zip Code 14810 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.4335 Date of Disbursement 06 / 23 / 2005 Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Marilyn MUSGRAVE FOR CONGRESS Mailing Address 5401 STONE CREEK CIRCLE SUITE 777 City LOVELAND State CO Zip Code 80538 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.4337 Date of Disbursement 03 / 17 / 2005 Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE Mailing Address 320 FIRST STREET City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Contribution 2005 Spring Gala Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other	Transaction ID: SB23.4338 Date of Disbursement 03 / 14 / 2005 Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

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

Use separate schedule(s)
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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

A.	Full Name (Last, First, Middle Initial) RICHARD G RENZI	Transaction ID: SB23.4346 Date of Disbursement 03 / 17 / 2005
	Mailing Address 2063 RAINTREE DRIVE	Amount of Each Disbursement this Period 1000.00
	City FLAGSTAFF State AZ Zip Code 86004	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MICHAEL ROGERS	Transaction ID: SB23.4348 Date of Disbursement 06 / 23 / 2005
	Mailing Address 123 East 13th Street	Amount of Each Disbursement this Period 1000.00
	City Anniston State AL Zip Code 36201	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SCHWARZ FOR CONGRESS	Transaction ID: SB23.4350 Date of Disbursement 06 / 23 / 2005
	Mailing Address POST OFFICE BOX 2063	Amount of Each Disbursement this Period 1000.00
	City BATTLE CREEK State MI Zip Code 49016	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3000.00
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 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)
HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)

<p>A. Full Name (Last, First, Middle Initial) Rob SIMMONS FOR CONGRESS</p> <p>Mailing Address P.O. Box 268 Drawer 271 P.O. Box 268 Drawer 271</p> <p>City Stonington State CT Zip Code 06378</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.4352 Date of Disbursement 03 / 17 / 2005</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Texas Legal Defense Fund</p> <p>Mailing Address 424 East Nueva</p> <p>City San Antonio State TX Zip Code 78205</p> <p>Purpose of Disbursement Legal Defense Fund Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.4354 Date of Disbursement 01 / 18 / 2005</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) ALAN R WILSON</p> <p>Mailing Address 5200 EUBANK NE SUITE A-1</p> <p>City ALBUQUERQUE State NM Zip Code 87111</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.4356 Date of Disbursement 06 / 23 / 2005</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	43000.00