

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Team America PAC

ADDRESS (number and street) 501 Church Street #217

Check if different than previously reported. (ACC)

Vienna VA 22180

2. **FEC IDENTIFICATION NUMBER** C00396291

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12G)

Election on _____ in the State of _____

(d) 30-Day **Post -Election** Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on _____ in the State of _____

5. Covering Period 05 01 2006 through 05 31 2006

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

Type or Print Name of Treasurer Sharon Korchnak

Signature of Treasurer Electronically Filed by Sharon Korchnak Date 06 17 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Team America PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	5

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		7424.48
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	10856.78									
(c) Total Receipts (from Line 19)	26624.43	193517.72								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	37481.21	200942.20								
7. Total Disbursements (from Line 31)	30362.87	193823.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7118.34	7118.34								
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)	53569.23									

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
Team America PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	5

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	6520.37	51073.35
(i) Itemized (use Schedule A)	19298.98	141633.95
(ii) Unitemized	25819.35	192707.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	25819.35	192707.30
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)	803.35	803.35
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.73	7.07
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))	26624.43	193517.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	26624.43	193517.72

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.....	30022.43	187983.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	30022.43	187983.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	340.44	5840.44
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))..	30362.87	193823.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	30362.87	193823.86

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)	25819.35	192707.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25819.35	192707.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30022.43	187983.42
37. Offsets to Operating Expenditures (from Line 15, page 3)	803.35	803.35
38. Net Operating Expenditures (subtract Line 37 from Line 36)	29219.08	187180.07

**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 / 47
	<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Kenneth Albers		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address PO Box 727		Transaction ID: 60517.C32440
City State Zip Code Spring Lake NJ 07762-0727	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Anonymous Anonymous		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 501 Church St NE DNM		Transaction ID: 60517.C32079
City State Zip Code Vienna VA 22180-4734	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer N/A	Occupation n/a	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2376.00	

Full Name (Last, First, Middle Initial) C. Anonymous Anonymous		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 501 Church St NE DNM		Transaction ID: 60517.C32080
City State Zip Code Vienna VA 22180-4734	Amount of Each Receipt this Period 3.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer N/A	Occupation n/a	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2379.00	

SUBTOTAL of Receipts This Page (optional) ▶	58.00
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 7 / 47
	<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Anonymous Anonymous		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 501 Church St NE DNM		Transaction ID: 60517.C32574
City Vienna State VA Zip Code 22180-4734	Amount of Each Receipt this Period 2.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer N/A Occupation n/a	Aggregate Year-to-Date ▼ 2381.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Anonymous Anonymous		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 501 Church St NE DNM		Transaction ID: 60517.C32748
City Vienna State VA Zip Code 22180-4734	Amount of Each Receipt this Period 3.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer N/A Occupation n/a	Aggregate Year-to-Date ▼ 2384.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Anonymous Anonymous		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 501 Church St NE DNM		Transaction ID: 60517.C32746
City Vienna State VA Zip Code 22180-4734	Amount of Each Receipt this Period 3.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer N/A Occupation n/a	Aggregate Year-to-Date ▼ 2387.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	8.00
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 / 47
	<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)
Team America PAC

A. Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address 501 Church St NE
DNM

City Vienna State VA Zip Code 22180-4734

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 ▼
2412.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	0	6

Transaction ID: 60518.C32774

Amount of Each Receipt this Period
25.00

Receipt

B. Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address 501 Church St NE
DNM

City Vienna State VA Zip Code 22180-4734

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 ▼
2462.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	3	/	2	0	0	6

Transaction ID: 60616.C32808

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Wana Archer

Mailing Address 7012 Devereux Circle Dr

City Alexandria State VA Zip Code 22315-4223

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

Name of Employer retired Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

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

Transaction ID: 60517.C32258

Amount of Each Receipt this Period
30.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	105.00
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 / 47
	<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Ronald Busse		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 8355 Bard Ranch Ct		Transaction ID: 60517.C32618	
City Prescott	State AZ	Zip Code 86305-4714	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. D Butler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 6	
Mailing Address 11515 Olde Tiverton Circle #202		Transaction ID: 60616.C33459	
City Reston	State VA	Zip Code 20194	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) C. Cornelia Cain		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 420S S Clinton St Unit 118A		Transaction ID: 60517.C32527	
City Chicago	State IL	Zip Code 60607-3803	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 200.00		

SUBTOTAL of Receipts This Page (optional)	500.00
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 10 / 47
	<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Adeline Corfman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1213 Marwood Dr		Transaction ID: 60517.C32125	
City State Zip Code Piqua OH 45356-4205	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Patricia Fournier		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1088 Plymouth St		Transaction ID: 60616.C32858	
City State Zip Code East Bridgewater MA 02333-2132	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested Occupation Information Requested	Aggregate Year-to-Date ▼ 200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Keith Gillar		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 204 Texas Road		Transaction ID: 60616.C32867	
City State Zip Code Old Bridge NJ 08857	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer self-employed Occupation Mover	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	355.00
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 / 47
	<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)
Team America PAC

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

Mailing Address 16 Forest Green Dr

City State Zip Code
Springfield IL 62707-8026

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

Name of Employer Mel-O-Cream Occupation president

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
05 / 17 / 2006

Transaction ID: 60517.C32737

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frederick Guardabassi

Mailing Address 915 Middle River Dr Ste 421

City State Zip Code
Fort Lauderdale FL 33304-3561

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

Name of Employer self Occupation investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
05 / 04 / 2006

Transaction ID: 60517.C32344

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Oliver Heatwole

Mailing Address 3900 16th St NW

City State Zip Code
Washington DC 20011-8326

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
05 / 17 / 2006

Transaction ID: 60517.C32745

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
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 12 / 47
	<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)
Team America PAC

A. Full Name (Last, First, Middle Initial)
Stan Hiatt

Mailing Address P.O. Box 578249

City Modesto State CA Zip Code 95357

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

Name of Employer retired Occupation Aviation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
05 / 15 / 2006

Transaction ID: 60616.C32818

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Roger Hill

Mailing Address 2118 Woodland Valley Drive

City Kingwood State TX Zip Code 77339

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

Name of Employer Retired- General Electric Powe Occupation Gas Turbine Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
05 / 07 / 2006

Transaction ID: 60517.C32624

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Walter Kleiner

Mailing Address 1725 89th PI NE

City Clyde Hill State WA Zip Code 98004-3213

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

Name of Employer none Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
05 / 22 / 2006

Transaction ID: 60616.C32786

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1450.00

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 13 / 47
	<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)
Team America PAC

A. Full Name (Last, First, Middle Initial)
Ursula Kremer

Mailing Address 4027 Rodeo Rd

City State Zip Code
Davenport IA 52806-4746

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

Name of Employer retired Occupation n/a

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2006

Transaction ID: 60517.C32166

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Francis Lehar

Mailing Address PO Box 1482

City State Zip Code
Manchester MA 01944-0856

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

Name of Employer retired Occupation n/a

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: 60517.C32122

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Michael Martino

Mailing Address 363 Contour Dr

City State Zip Code
Cheshire CT 06410-2106

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

Name of Employer MTA Occupation transportation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: 60517.C32126

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	300.00
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 14 / 47
	<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)
Team America PAC

A. Full Name (Last, First, Middle Initial) Nedrick McCune Mailing Address 424 E 16th St. City State Zip Code Costa Mesa CA 92627 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6 Transaction ID: 60517.C32157 Amount of Each Receipt this Period 200.00 Receipt
Name of Employer Occupation Marines Mile Co RE Mgr Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		

B. Full Name (Last, First, Middle Initial) Michael Miller Mailing Address 4402 Boxwood Rd City State Zip Code Bethesda MD 20816-1818 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 Transaction ID: 60517.C32595 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer Occupation self investments Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		

C. Full Name (Last, First, Middle Initial) Vernon Monroe Mailing Address 5209 Seashore Dr Ste 100 City State Zip Code Newport Beach CA 92663-2421 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6 Transaction ID: 60517.C32154 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer Occupation self n/a Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		

SUBTOTAL of Receipts This Page (optional)	400.00
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 / 47
	<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)
Team America PAC

A. Full Name (Last, First, Middle Initial)
William Morton

Mailing Address 5727 Newcastle Lane

City State Zip Code
Calabasas CA 91302

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

Name of Employer Occupation
Municipal Finance Corporation Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2006

Transaction ID: 60616.C32833

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Nicolas Nowinski

Mailing Address 12958 Centre Park Circle
Unit 125

City State Zip Code
Herndon VA 20171

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

Name of Employer Occupation
immixGroup, Inc. Systems Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2006

Transaction ID: 60616.C33461

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
John Roth

Mailing Address PO Box 369

City State Zip Code
Homosassa Springs FL 34447-0369

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2006

Transaction ID: 60517.C32348

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	600.00
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 16 / 47
	<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Craig Russell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address PO Box 1388		Transaction ID: 60616.C32822	
City State Zip Code Draper UT 84020	Amount of Each Receipt this Period 244.37		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation FedEx engineer	Aggregate Year-to-Date ▼ 244.37		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. & Mrs. Ryan Ryan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 393 Dorchester Rd		Transaction ID: 60517.C32495	
City State Zip Code Lyme NH 03768-3900	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation N/A Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Charles Schneider		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 68 Raymond Ave		Transaction ID: 60517.C32486	
City State Zip Code Rutherford NJ 07070-1134	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation N/A Retired	Aggregate Year-to-Date ▼ 200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	594.37
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 17 / 47
	<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Tonya Trevarthen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1504 Cutler Drive		Transaction ID: 60517.C32728	
City State Zip Code Las Vegas NV 89117	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation student-elementary education m	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Elizabeth Van Staaveren		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1008 NW Cascade Way		Transaction ID: 60517.C32684	
City State Zip Code McMinnville OR 97128	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer retired Occupation Retired	Aggregate Year-to-Date ▼ 1300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Emil Wolf		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2580 Carmine Rd		Transaction ID: 60517.C32615	
City State Zip Code Venice FL 34293-3301	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested Occupation Information Requested	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	300.00
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 18 / 47
	(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)
Team America PAC

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

Mailing Address 12601 Maribou Cir

City State Zip Code
Orlando FL 32828-7118

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

Name of Employer Gestalt-LLC Occupation software engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2006

Transaction ID: 60517.C32341

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Ann Yates

Mailing Address PO Box 469

City State Zip Code
Siasconset MA 02564

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

Name of Employer self Occupation recruiter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: 60616.C33469

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	6520.37

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 19 / 47	
	(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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team America PAC

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

Mailing Address 34 Saint Andrews Dr

City State Zip Code
Little Rock AR 72212-2909

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
658.20

Date of Receipt

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

Transaction ID: 60616.C33853

Amount of Each Receipt this Period
658.20

Offsets to Operating Expenditure

SUBTOTAL of Receipts This Page (optional)	▶	658.20
TOTAL This Period (last page this line number only)	▶	658.20

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 20 / 47

<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Corporate Payroll Services		Transaction ID: 60616.E2007 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 354.22
City Rockville State MD Zip Code 20850-6108	FED/STATE/LOCAL TAXES	
Purpose of Disbursement fed/state/local taxes Candidate Name		001 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. Corporate Payroll Services		Transaction ID: 60616.E2006 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 31.90
City Rockville State MD Zip Code 20850-6108	PAYROLL SERVICE FEE	
Purpose of Disbursement payroll service fee Candidate Name		001 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. Corporate Payroll Services		Transaction ID: 60616.E1975 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 2601.09
City Rockville State MD Zip Code 20850-6108	FED/STATE WITHHOLDING	
Purpose of Disbursement fed/state withholding Candidate Name		001 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) ▶	2987.21
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 21 / 47

<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Corporate Payroll Services		Transaction ID: 60616.E1974 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 43.05
City Rockville State MD Zip Code 20850-6108	001 Category/ Type PAYROLL SERVICE FEE	
Purpose of Disbursement payroll service 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. Corporate Payroll Services		Transaction ID: 60616.E1984 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 38.30
City Rockville State MD Zip Code 20850-6108	001 Category/ Type PAYROLL SERVICE FEE	
Purpose of Disbursement payroll service 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. Corporate Payroll Services		Transaction ID: 60616.E1985 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 1030.14
City Rockville State MD Zip Code 20850-6108	001 Category/ Type FED/STATE WITHHOLDING	
Purpose of Disbursement fed/state withholding 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) ▶	1111.49
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 22 / 47

<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Friends for Dix Congressional Committee		Transaction ID: 60616.E1932 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address PO Box 613		Amount of Each Disbursement this Period 1000.00
City Waverly	State IA Zip Code 50677-0613	
Purpose of Disbursement CONTRIBUTION		CONTRIBUTION
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. BB & T		Transaction ID: 60517.E1918 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 84.59
City Vienna	State VA Zip Code 22180-4723	
Purpose of Disbursement -Credit Card Fees		-CREDIT CARD FEES
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. BB & T		Transaction ID: 60616.E1990 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 6
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 34.35
City Vienna	State VA Zip Code 22180-4723	
Purpose of Disbursement -Credit Card Fees		-CREDIT CARD FEES
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) ▶	1118.94
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 23 / 47

<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. BB & T		Transaction ID: 60616.E1991 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 6	
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 44.20	
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Credit Card Fees	001 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:	-CREDIT CARD FEES		

Full Name (Last, First, Middle Initial) B. BB & T		Transaction ID: 60616.E1992 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 6	
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 114.95	
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Credit Card Fees	001 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:	-CREDIT CARD FEES		

Full Name (Last, First, Middle Initial) C. BB & T		Transaction ID: 60616.E1993 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 6	
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 351.45	
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Credit Card Fees	001 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:	-CREDIT CARD FEES		

SUBTOTAL of Disbursements This Page (optional) ▶	510.60
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 24 / 47

<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. BB & T		Transaction ID: 60616.E1995 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 6
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 35.20
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Credit Card 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) ▼	-CREDIT CARD FEES

Full Name (Last, First, Middle Initial) B. BB & T		Transaction ID: 60616.E1996 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 6
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 44.05
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Credit Card 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) ▼	-CREDIT CARD FEES

Full Name (Last, First, Middle Initial) C. BB & T		Transaction ID: 60616.E1994 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 6
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 103.21
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Credit Card 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) ▼	-CREDIT CARD FEES

SUBTOTAL of Disbursements This Page (optional) ▶	182.46
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. BB & T		Transaction ID: 60616.E1998 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 16.77
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Bank Service Charge 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) ▼	-BANK SERVICE CHARGE

Full Name (Last, First, Middle Initial) B. BB & T		Transaction ID: 60616.E2001 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 113.08
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Bank Service Charge 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) ▼	-BANK SERVICE CHARGE

Full Name (Last, First, Middle Initial) C. BB & T		Transaction ID: 60616.E1997 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 6
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 72.80
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Credit Card 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) ▼	-CREDIT CARD FEES

SUBTOTAL of Disbursements This Page (optional) ▶	202.65
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. BB & T		Transaction ID: 60616.E1999 Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 17.10	
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Credit Card Fees	001 Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-CREDIT CARD FEES		

Full Name (Last, First, Middle Initial) B. BB & T		Transaction ID: 60616.E2000 Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 34.55	
City Vienna State VA Zip Code 22180-4723	Purpose of Disbursement -Credit Card Fees	001 Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-CREDIT CARD FEES		

Full Name (Last, First, Middle Initial) C. Angela Buchanan		Transaction ID: 60616.E1946 Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 11321 Hunt Farm Ln.		Amount of Each Disbursement this Period 194.29	
City Oakton State VA Zip Code 22124-	Purpose of Disbursement -reimbursement	001 Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	-REIMBURSEMENT		

SUBTOTAL of Disbursements This Page (optional) ▶	245.94
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Angela Buchanan		Transaction ID: 60616.E1977 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 11321 Hunt Farm Ln.		Amount of Each Disbursement this Period 2473.19
City State Zip Code Oakton VA 22124-	PAYROLL	
Purpose of Disbursement payroll		Category/ Type 001
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. Angela Buchanan		Transaction ID: 60616.E1949 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 11321 Hunt Farm Ln.		Amount of Each Disbursement this Period 658.20
City State Zip Code Oakton VA 22124-	- TRAVEL REIMBURSEMENT	
Purpose of Disbursement - travel reimbursement		Category/ Type 001
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. Coast to Coast Hosting		Transaction ID: 60616.E1958 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address PO Box 181066		Amount of Each Disbursement this Period 80.00
City State Zip Code Denver CO 80218-8822	- WEBSITE HOSTING	
Purpose of Disbursement - website hosting		Category/ Type 004
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) ▶	3211.39
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Conrad Direct		Transaction ID: 60616.E1960 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 300 Knickerbocker Rd		Amount of Each Disbursement this Period 10.00
City Cresskill State NJ Zip Code 07626-1350	-NONCANDIDATE SPECIFIC FUNDRAISI	
Purpose of Disbursement -noncandidate specific fundraisi Candidate Name		003 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. Richard Curtiss		Transaction ID: 60616.E2003 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 11321 Hunt Farm Ln		Amount of Each Disbursement this Period 313.27
City Oakton State VA Zip Code 22124-1202	-PAYROLL	
Purpose of Disbursement -payroll Candidate Name		001 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. Dish Network		Transaction ID: 60616.E1961 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address PO Box 9033		Amount of Each Disbursement this Period 49.99
City Littleton State CO Zip Code 80160-9033	- TV	
Purpose of Disbursement - tv Candidate Name		001 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) ▶	373.26
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Marcus Epstein		Transaction ID: 60616.E2005 Date of Disbursement MM / DD / YYYY 05 / 05 / 2006
Mailing Address 2800 Woodley Rd NW Apt 238		Amount of Each Disbursement this Period 646.46
City Washington State DC Zip Code 20008-	Category/ Type 001 -PAYROLL	
Purpose of Disbursement -Payroll 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. Marcus Epstein		Transaction ID: 60616.E1981 Date of Disbursement MM / DD / YYYY 05 / 15 / 2006
Mailing Address 2800 Woodley Rd NW Apt 238		Amount of Each Disbursement this Period 646.46
City Washington State DC Zip Code 20008-	Category/ Type 001 PAYROLL	
Purpose of Disbursement payroll 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. Marcus Epstein		Transaction ID: 60616.E1988 Date of Disbursement MM / DD / YYYY 05 / 31 / 2006
Mailing Address 2800 Woodley Rd NW Apt 238		Amount of Each Disbursement this Period 646.46
City Washington State DC Zip Code 20008-	Category/ Type 001 PAYROLL	
Purpose of Disbursement payroll 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) ▶	1939.38
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Falcon Printing		Transaction ID: 60616.E1947 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1921 Gallows Rd		Amount of Each Disbursement this Period 2000.00
City Vienna State VA Zip Code 22182-3900	- DEBT PAYT-NON CANDIDATE SPECIF	
Purpose of Disbursement - debt payt-non candidate specif Candidate Name		003 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. Falcon Printing		Transaction ID: 60616.E1957 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 1921 Gallows Rd		Amount of Each Disbursement this Period 2000.00
City Vienna State VA Zip Code 22182-3900	- DEBT PAYT-NON CANDIDATE SPECIF	
Purpose of Disbursement - debt payt-non candidate specif Candidate Name		003 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. Falcon Printing		Transaction ID: 60616.E1968 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1921 Gallows Rd		Amount of Each Disbursement this Period 1000.00
City Vienna State VA Zip Code 22182-3900	- DEBT PAYT-NON CANDIDATE SPECIF	
Purpose of Disbursement - debt payt-non candidate specif Candidate Name		003 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) ▶	5000.00
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)

<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Falcon Printing		Transaction ID: 60616.E2008 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 1921 Gallows Rd		Amount of Each Disbursement this Period 1000.00
City Vienna State VA Zip Code 22182-3900	- DEBT PAYT-NON CANDIDATE SPECIF	
Purpose of Disbursement - debt payt-non candidate specif Candidate Name		003 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. Hannah Kosa		Transaction ID: 60616.E1979 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 5540 Spangler Ln		Amount of Each Disbursement this Period 646.46
City Woodbridge State VA Zip Code 22193-3506	PAYROLL	
Purpose of Disbursement payroll Candidate Name		001 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. Hannah Kosa		Transaction ID: 60616.E1987 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 5540 Spangler Ln		Amount of Each Disbursement this Period 646.46
City Woodbridge State VA Zip Code 22193-3506	PAYROLL	
Purpose of Disbursement payroll Candidate Name		001 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) ▶	2292.92
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)
Team America PAC

A. Full Name (Last, First, Middle Initial) P. Daniel Orlich		Transaction ID: 60616.E1933 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 107 East St NE		Amount of Each Disbursement this Period 580.00	
City Vienna State VA Zip Code 22180-3615	Purpose of Disbursement -rent	Category/Type 001	
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) ▼	-RENT	

B. Full Name (Last, First, Middle Initial) Southwest Publishing		Transaction ID: 60616.E1967 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 2600 NW Topeka Blvd		Amount of Each Disbursement this Period 1000.00	
City Topeka State KS Zip Code 66617-1160	Purpose of Disbursement debt payt non candidate specifi	Category/Type 003	
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) ▼	DEBT PAYT NON CANDIDATE SPECIFI	

C. Full Name (Last, First, Middle Initial) Mrs. Shelly Uscinski		Transaction ID: 60616.E1935 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 3 Forest Dr		Amount of Each Disbursement this Period 2122.33	
City Merrimack State NH Zip Code 03054-3274	Purpose of Disbursement -debt payt-non-cand.spec. consul	Category/Type 001	
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) ▼	-DEBT PAYT-NON-CAND.SPEC. CONSUL	

SUBTOTAL of Disbursements This Page (optional) ▶	3702.33
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: 60616.E1934 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address Laywers Rd & Church St		Amount of Each Disbursement this Period 195.00
City Vienna State VA Zip Code 22180-	Purpose of Disbursement -non candidate specific 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) ▼	-NON CANDIDATE SPECIFIC POSTAGE

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: 60616.E1938 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address Laywers Rd & Church St		Amount of Each Disbursement this Period 15.30
City Vienna State VA Zip Code 22180-	Purpose of Disbursement -non specific candidate 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) ▼	-NON SPECIFIC CANDIDATE POSTAGE

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: 60616.E1941 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address Laywers Rd & Church St		Amount of Each Disbursement this Period 342.79
City Vienna State VA Zip Code 22180-	Purpose of Disbursement -non candidate specific 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) ▼	-NON CANDIDATE SPECIFIC POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶	553.09
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: 60616.E1942 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address Laywers Rd & Church St		Amount of Each Disbursement this Period 437.19
City Vienna State VA Zip Code 22180-	Purpose of Disbursement -non candidate specific 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) ▼	-NON CANDIDATE SPECIFIC POSTAGE

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: 60616.E1943 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address Laywers Rd & Church St		Amount of Each Disbursement this Period 58.10
City Vienna State VA Zip Code 22180-	Purpose of Disbursement -non candidate specific 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) ▼	-NON CANDIDATE SPECIFIC POSTAGE

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: 60616.E1948 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address Laywers Rd & Church St		Amount of Each Disbursement this Period 341.45
City Vienna State VA Zip Code 22180-	Purpose of Disbursement -non candidate specific 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) ▼	-NON CANDIDATE SPECIFIC POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶	836.74
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: 60616.E1950 Date of Disbursement																					
Mailing Address Laywers Rd & Church St		<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>5</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	5		1	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	5		2	0	0	6														
City Vienna	State VA	Zip Code 22180-	Amount of Each Disbursement this Period																				
Purpose of Disbursement non candidate specific postage			187.57																				
Candidate Name			001 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:	NON CANDIDATE SPECIFIC POSTAGE																						

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: 60616.E1953 Date of Disbursement																					
Mailing Address Laywers Rd & Church St		<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>5</td><td></td><td>1</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	5		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	6		2	0	0	6														
City Vienna	State VA	Zip Code 22180-	Amount of Each Disbursement this Period																				
Purpose of Disbursement non candidate specific postage			553.70																				
Candidate Name			001 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:	NON CANDIDATE SPECIFIC POSTAGE																						

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: 60616.E1954 Date of Disbursement																					
Mailing Address Laywers Rd & Church St		<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>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	7		2	0	0	6														
City Vienna	State VA	Zip Code 22180-	Amount of Each Disbursement this Period																				
Purpose of Disbursement non candidate specific postage			8.10																				
Candidate Name			001 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:	NON CANDIDATE SPECIFIC POSTAGE																						

SUBTOTAL of Disbursements This Page (optional)	▶	749.37
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)

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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)
Team America PAC

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: 60616.E1956 Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
Mailing Address Laywers Rd & Church St		Amount of Each Disbursement this Period 40.99
City Vienna State VA Zip Code 22180-	Purpose of Disbursement non specific candidate 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) ▼	NON SPECIFIC CANDIDATE POSTAGE

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: 60616.E1963 Date of Disbursement MM / DD / YYYY 05 / 22 / 2006
Mailing Address Laywers Rd & Church St		Amount of Each Disbursement this Period 97.19
City Vienna State VA Zip Code 22180-	Purpose of Disbursement non candidate specific 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) ▼	NON CANDIDATE SPECIFIC POSTAGE

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: 60616.E1964 Date of Disbursement MM / DD / YYYY 05 / 23 / 2006
Mailing Address Laywers Rd & Church St		Amount of Each Disbursement this Period 13.77
City Vienna State VA Zip Code 22180-	Purpose of Disbursement non candidate specific 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) ▼	NON CANDIDATE SPECIFIC POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶	151.95
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: 60616.E1965 Date of Disbursement																					
Mailing Address Laywers Rd & Church St		<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>5</td><td></td><td>2</td><td>4</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	5		2	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	4		2	0	0	6														
City Vienna	State VA	Zip Code 22180-	Amount of Each Disbursement this Period																				
Purpose of Disbursement non candidate specific postage			41.69																				
Candidate Name			001 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:	NON CANDIDATE SPECIFIC POSTAGE																						

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: 60616.E1969 Date of Disbursement																					
Mailing Address Laywers Rd & Church St		<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>5</td><td></td><td>2</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	5		2	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	6		2	0	0	6														
City Vienna	State VA	Zip Code 22180-	Amount of Each Disbursement this Period																				
Purpose of Disbursement non candidate specific postage			234.00																				
Candidate Name			001 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:	NON CANDIDATE SPECIFIC POSTAGE																						

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: 60616.E1970 Date of Disbursement																					
Mailing Address Laywers Rd & Church St		<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>5</td><td></td><td>3</td><td>0</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	5		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		3	0		2	0	0	6														
City Vienna	State VA	Zip Code 22180-	Amount of Each Disbursement this Period																				
Purpose of Disbursement non candidate specific postage			29.05																				
Candidate Name			001 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:	NON CANDIDATE SPECIFIC POSTAGE																						

SUBTOTAL of Disbursements This Page (optional)	▶	304.74
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)
Team America PAC

A. USPS Full Name (Last, First, Middle Initial) Mailing Address Laywers Rd & Church St City Vienna State VA Zip Code 22180- Purpose of Disbursement non candidate specific 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) ▼		Transaction ID: 60616.E1972 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 1365.00 NON CANDIDATE SPECIFIC POSTAGE
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B. Verizon Full Name (Last, First, Middle Initial) Mailing Address PO Box 17577 City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement -phone bill 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: 60616.E1962 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 Amount of Each Disbursement this Period 406.08 -PHONE BILL
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C. Verizon Wireless Full Name (Last, First, Middle Initial) Mailing Address PO Box 17120 City Tucson State AZ Zip Code 85731-7120 Purpose of Disbursement -phone 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: 60616.E1937 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 185.46 -PHONE
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SUBTOTAL of Disbursements This Page (optional) ▶	1956.54
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Katherine Ward		Transaction ID: 60616.E1936 Date of Disbursement MM / DD / YYYY 05 / 03 / 2006	
Mailing Address 3424 Tulane Dr Apt 11		Amount of Each Disbursement this Period 53.82	
City Hyattsville State MD Zip Code 20783-1840	Purpose of Disbursement -mileage reimbursement	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

-MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial) B. Katherine Ward		Transaction ID: 60616.E1978 Date of Disbursement MM / DD / YYYY 05 / 15 / 2006	
Mailing Address 3424 Tulane Dr Apt 11		Amount of Each Disbursement this Period 616.83	
City Hyattsville State MD Zip Code 20783-1840	Purpose of Disbursement payroll	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

PAYROLL

Full Name (Last, First, Middle Initial) C. Katherine Ward		Transaction ID: 60616.E1986 Date of Disbursement MM / DD / YYYY 05 / 31 / 2006	
Mailing Address 3424 Tulane Dr Apt 11		Amount of Each Disbursement this Period 616.83	
City Hyattsville State MD Zip Code 20783-1840	Purpose of Disbursement payroll	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶	1287.48
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)
Team America PAC

A. Davita Washington Full Name (Last, First, Middle Initial) Davita Washington Mailing Address 2022 Willow Branch Ct City Vienna State VA Zip Code 22181-2972 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: 60616.E1982 Date of Disbursement 05 / 15 / 2006 Amount of Each Disbursement this Period 600.63 001 Category/Type PAYROLL
---	--	--

B. Davita Washington Full Name (Last, First, Middle Initial) Davita Washington Mailing Address 2022 Willow Branch Ct City Vienna State VA Zip Code 22181-2972 Purpose of Disbursement -reimbursement 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: 60616.E1959 Date of Disbursement 05 / 19 / 2006 Amount of Each Disbursement this Period 23.52 001 Category/Type -REIMBURSEMENT
--	--	--

C. Davita Washington Full Name (Last, First, Middle Initial) Davita Washington Mailing Address 2022 Willow Branch Ct City Vienna State VA Zip Code 22181-2972 Purpose of Disbursement mileage reimbursement 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: 60616.E1973 Date of Disbursement 05 / 31 / 2006 Amount of Each Disbursement this Period 79.16 001 Category/Type MILEAGE REIMBURSEMENT
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SUBTOTAL of Disbursements This Page (optional) ▶	703.31
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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Davita Washington		Transaction ID: 60616.E1989 Date of Disbursement 05 / 31 / 2006	
Mailing Address 2022 Willow Branch Ct		Amount of Each Disbursement this Period 600.64	
City Vienna State VA Zip Code 22181-2972	Purpose of Disbursement payroll Candidate Name Category/Type 001		
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) ▼		
		PAYROLL	

SUBTOTAL of Disbursements This Page (optional)	600.64
TOTAL This Period (last page this line number only)	30022.43

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 42 / 47

<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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Home Depot		Transaction ID: 60616.E1951 Date of Disbursement 05 / 16 / 2006	
Mailing Address 2815 Merrilee Dr		Amount of Each Disbursement this Period 60.90	
City Fairfax State VA Zip Code 22031-4409	Purpose of Disbursement non candidate specific fundrais Candidate Name	003 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) ▼	NON CANDIDATE SPECIFIC FU-NDRAIS	

Full Name (Last, First, Middle Initial) B. Home Depot		Transaction ID: 60616.E1955 Date of Disbursement 05 / 18 / 2006	
Mailing Address 2815 Merrilee Dr		Amount of Each Disbursement this Period 4.26	
City Fairfax State VA Zip Code 22031-4409	Purpose of Disbursement non candidate specific fundrais Candidate Name	003 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) ▼	NON CANDIDATE SPECIFIC FU-NDRAIS	

Full Name (Last, First, Middle Initial) C. Home Depot		Transaction ID: 60616.E1939 Date of Disbursement 05 / 08 / 2006	
Mailing Address 2815 Merrilee Dr		Amount of Each Disbursement this Period 87.80	
City Fairfax State VA Zip Code 22031-4409	Purpose of Disbursement -non candidate speciic fundraisi Candidate Name	003 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) ▼	-NON CANDIDATE SPECIIC FU-NDRAISI	

SUBTOTAL of Disbursements This Page (optional) ▶	152.96
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 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

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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Home Depot		Transaction ID: 60616.E1966 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 2815 Merrilee Dr		Amount of Each Disbursement this Period 2.44	
City Fairfax State VA Zip Code 22031-4409	Purpose of Disbursement non candidate specific fundrais Candidate Name	003 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) ▼	NON CANDIDATE SPECIFIC FU- NDRAIS	

Full Name (Last, First, Middle Initial) B. Home Depot		Transaction ID: 60616.E1945 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 2815 Merrilee Dr		Amount of Each Disbursement this Period 48.72	
City Fairfax State VA Zip Code 22031-4409	Purpose of Disbursement -non candidate specific fundrais Candidate Name	003 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) ▼	-NON CANDIDATE SPECIFIC FUNDRAIS	

Full Name (Last, First, Middle Initial) C. Home Depot		Transaction ID: 60616.E1971 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2815 Merrilee Dr		Amount of Each Disbursement this Period 6.09	
City Fairfax State VA Zip Code 22031-4409	Purpose of Disbursement non candidate specific fundrais Candidate Name	003 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) ▼	NON CANDIDATE SPECIFIC FU- NDRAIS	

SUBTOTAL of Disbursements This Page (optional) ▶	57.25
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 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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: 60616.E1952 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 2901 Gallows Rd		Amount of Each Disbursement this Period 13.20
City Falls Church State VA Zip Code 22042-1007	Purpose of Disbursement office supplies Candidate Name Category/Type 001	
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) ▼	OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) B. Office Depot		Transaction ID: 60616.E1940 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2901 Gallows Rd		Amount of Each Disbursement this Period 88.74
City Falls Church State VA Zip Code 22042-1007	Purpose of Disbursement -office supplies Candidate Name Category/Type 001	
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) ▼	-OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: 60616.E1944 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 2901 Gallows Rd		Amount of Each Disbursement this Period 28.29
City Falls Church State VA Zip Code 22042-1007	Purpose of Disbursement - office supplies Candidate Name Category/Type 001	
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) ▼	- OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶	130.23
TOTAL This Period (last page this line number only) ▶	340.44

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 45 / 47 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
Team America PAC

Transaction ID: LS60125.C27023

LOAN SOURCE Full Name (Last, First, Middle Initial) Jennie Baadsgaard	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1215 W 900 S	
City Spanish Fork State UT ZIP Code 84660-9270	

Original Amount of Loan 4914.50	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4914.50
------------------------------------	------------------------------------	--

TERMS	Date Incurred MM DD YY 12 20 2005	Date Due 20051220	Interest Rate .1000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---	----------------------	--------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="4914.50"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="4914.50"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 46 / 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Team America PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Falcon Printing	Nature of Debt (Purpose): 003-addl debt-non-cand.sp-ec. prntg
Mailing Address 1921 Gallows Rd	
City State ZIP Code Vienna VA 22182-3900	

Outstanding Balance Beginning This Period <input type="text" value="36129.29"/>	Transaction ID: LS60616.E1947	
Amount Incurred This Period <input type="text" value="1407.00"/>	Payment This Period <input type="text" value="6000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="31536.29"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southwest Publishing	Nature of Debt (Purpose): 003 debt payt non candida-te specifi
Mailing Address 2600 NW Topeka Blvd	
City State ZIP Code Topeka KS 66617-1160	

Outstanding Balance Beginning This Period <input type="text" value="14342.44"/>	Transaction ID: LS60616.E1967	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="13342.44"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alexander & MacGregor, Inc.	Nature of Debt (Purpose): 003-addl debt - Non-candi-date-spec
Mailing Address PO Box 40580	
City State ZIP Code Washington DC 20016-0580	

Outstanding Balance Beginning This Period <input type="text" value="3776.00"/>	Transaction ID: LS41202.E923	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3776.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="48654.73"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 47 / 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Team America PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mrs. Shelly Uscinski	Nature of Debt (Purpose): 001-debt payt-non-cand.sp-ec. consul
Mailing Address 3 Forest Dr	
City State ZIP Code Merrimack NH 03054-3274	

Outstanding Balance Beginning This Period	Transaction ID: LS60616.E1935	
2122.33		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2122.33	0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	48654.73
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	