

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 07 01 2007 through 12 31 2007

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

Type or Print Name of Treasurer Christine Maiolo

Signature of Treasurer Electronically Filed by Christine Maiolo Date 01 30 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		41566.73
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	73397.78									
(c) Total Receipts (from Line 19)	65022.30	189598.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	138420.08	231165.22								
7. Total Disbursements (from Line 31)	74456.48	167201.62								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	63963.60	63963.60								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	62249.32	178826.68
(i) Itemized (use Schedule A)	2772.98	10771.81
(ii) Unitemized	65022.30	189598.49
(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)	65022.30	189598.49
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	65022.30	189598.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	65022.30	189598.49

DETAILED SUMMARY PAGE

of Disbursements

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.....	456.48	1790.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	456.48	1790.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	74000.00	164000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1411.00
(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	1411.00
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))..	74456.48	167201.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74456.48	167201.62

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	65022.30	189598.49
34. Total Contribution Refunds (from Line 28(d))	0.00	1411.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	65022.30	188187.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	456.48	1790.62
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	456.48	1790.62

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 132

(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

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

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

A.

Full Name (Last, First, Middle Initial)
Gregory Box

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP Technology Account Management

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 744.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2007

Transaction ID: 20070711-65-13-14

Amount of Each Receipt this Period

62.00

B.

Full Name (Last, First, Middle Initial)
Gregory Box

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP Technology Account Management

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 744.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: 20070814-65-11-1

Amount of Each Receipt this Period

62.00

C.

Full Name (Last, First, Middle Initial)
Gregory Box

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP Technology Account Management

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 744.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2007

Transaction ID: 20070913-66-14-12

Amount of Each Receipt this Period

62.00

SUBTOTAL of Receipts This Page (optional) ▶

186.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Gregory Box		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071012-66-14-34
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.00
Name of Employer MasterCard	Occupation VP Technology Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 744.00	

B.

Full Name (Last, First, Middle Initial) Gregory Box		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071113-66-10-35
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.00
Name of Employer MasterCard	Occupation VP Technology Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 744.00	

C.

Full Name (Last, First, Middle Initial) Gregory Box		Date of Receipt MM / DD / YYYY 12 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071212-67-9-33
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.00
Name of Employer MasterCard	Occupation VP Technology Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 744.00	

SUBTOTAL of Receipts This Page (optional)	186.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 132

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Michael Cyr

Mailing Address PO Box 40002

City State Zip Code
Olympia WA 98504-0002

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

Name of Employer Occupation
MasterCard VP/Team Leader-Member Relation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-74-10-35

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Michael Cyr

Mailing Address PO Box 40002

City State Zip Code
Olympia WA 98504-0002

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

Name of Employer Occupation
MasterCard VP/Team Leader-Member Relation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-75-9-33

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Heidi Davidson

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Director State Govt Affairs

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-64-13-14

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional) ►

390.00

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

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

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

FOR LINE NUMBER: PAGE 9 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Heidi Davidson
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2509
 Date of Receipt 08 / 15 / 2007
Transaction ID: 20070814-64-11-1
 Amount of Each Receipt this Period 350.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Director State Govt Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 3500.00

B. Full Name (Last, First, Middle Initial)
Heidi Davidson
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2509
 Date of Receipt 09 / 15 / 2007
Transaction ID: 20070913-65-14-12
 Amount of Each Receipt this Period 350.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Director State Govt Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 3500.00

C. Full Name (Last, First, Middle Initial)
Heidi Davidson
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2509
 Date of Receipt 10 / 15 / 2007
Transaction ID: 20071012-65-14-34
 Amount of Each Receipt this Period 350.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Director State Govt Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 3500.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 10 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Heidi Davidson
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Director State Govt Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.00
Date of Receipt 11 / 15 / 2007
Transaction ID: 20071113-65-10-35
Amount of Each Receipt this Period 350.00

B. Full Name (Last, First, Middle Initial)
Heidi Davidson
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Director State Govt Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.00
Date of Receipt 12 / 15 / 2007
Transaction ID: 20071212-66-9-33
Amount of Each Receipt this Period 350.00

C. Full Name (Last, First, Middle Initial)
Patricia Devereux
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Business Administration
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-4-13-14
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Patricia Devereux
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2509
 Date of Receipt 08 / 15 / 2007
Transaction ID: 20070814-4-11-1
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MasterCard Occupation VP/Business Administration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 600.00

B. Full Name (Last, First, Middle Initial)
Patricia Devereux
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2509
 Date of Receipt 09 / 15 / 2007
Transaction ID: 20070913-4-14-12
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MasterCard Occupation VP/Business Administration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 600.00

C. Full Name (Last, First, Middle Initial)
Patricia Devereux
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2509
 Date of Receipt 10 / 15 / 2007
Transaction ID: 20071012-4-14-34
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MasterCard Occupation VP/Business Administration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 600.00

SUBTOTAL of Receipts This Page (optional) ► 150.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 132
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Patricia Devereux

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Business Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: 20071113-4-10-35
 Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
Patricia Devereux

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Business Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 15 / 2007
Transaction ID: 20071212-4-9-33
 Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
Simon Dix

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/CTOS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 23 / 2007
Transaction ID: 800C9AEE-1ACB-437F-
 Amount of Each Receipt this Period: 500.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 132

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP/Asst. General Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2007

Transaction ID: 20070711-5-13-14

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP/Asst. General Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: 20070814-5-11-1

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP/Asst. General Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2007

Transaction ID: 20070913-5-14-12

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 132
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

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

A.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation SVP/Asst. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 10 / 15 / 2007
Transaction ID: 20071012-5-14-34
Amount of Each Receipt this Period: 125.00

B.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation SVP/Asst. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: 20071113-5-10-35
Amount of Each Receipt this Period: 125.00

C.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation SVP/Asst. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 12 / 15 / 2007
Transaction ID: 20071212-5-9-33
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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

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

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

FOR LINE NUMBER: PAGE 15 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 15 / 2007

Transaction ID: 20070711-6-13-14

Amount of Each Receipt this Period
 30.00

B. Full Name (Last, First, Middle Initial)
Nadia Dombrowski

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 15 / 2007

Transaction ID: 20070814-6-11-1

Amount of Each Receipt this Period
 30.00

C. Full Name (Last, First, Middle Initial)
Nadia Dombrowski

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 15 / 2007

Transaction ID: 20070913-6-14-12

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 10 / 15 / 2007
Transaction ID: 20071012-6-14-34
 Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Nadia Dombrowski

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: 20071113-6-10-35
 Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Nadia Dombrowski

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 12 / 15 / 2007
Transaction ID: 20071212-6-9-33
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 132
	<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Roy Dunbar	Date of Receipt MM / DD / YYYY 07 / 15 / 2007
	Mailing Address 2200 Mastercard Boulevard	Transaction ID: 20070711-8-13-14
	City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation SEVP/Global Tech Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4992.00	

B.	Full Name (Last, First, Middle Initial) Roy Dunbar	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 2200 Mastercard Boulevard	Transaction ID: 20070814-8-11-1
	City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation SEVP/Global Tech Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4992.00	

C.	Full Name (Last, First, Middle Initial) Roy Dunbar	Date of Receipt MM / DD / YYYY 09 / 15 / 2007
	Mailing Address 2200 Mastercard Boulevard	Transaction ID: 20070913-8-14-12
	City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation SEVP/Global Tech Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4992.00	

SUBTOTAL of Receipts This Page (optional)	▶	1248.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 132
(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

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

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

A.

Full Name (Last, First, Middle Initial) Roy Dunbar		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071012-8-14-34
City O Fallon	State MO	Zip Code 63366-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
Name of Employer MasterCard	Occupation SEVP/Global Tech Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

B.

Full Name (Last, First, Middle Initial) Roy Dunbar		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071113-8-10-35
City O Fallon	State MO	Zip Code 63366-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
Name of Employer MasterCard	Occupation SEVP/Global Tech Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

C.

Full Name (Last, First, Middle Initial) Roy Dunbar		Date of Receipt MM / DD / YYYY 12 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071212-8-9-33
City O Fallon	State MO	Zip Code 63366-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
Name of Employer MasterCard	Occupation SEVP/Global Tech Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

SUBTOTAL of Receipts This Page (optional)	▶	1248.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 132

(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

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

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

A.

Full Name (Last, First, Middle Initial)
Patrick Dwyer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Consumer & Public Affairs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: 20070814-69-11-1

Amount of Each Receipt this Period

26.00

B.

Full Name (Last, First, Middle Initial)
Patrick Dwyer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Consumer & Public Affairs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2007

Transaction ID: 20070913-70-14-12

Amount of Each Receipt this Period

26.00

C.

Full Name (Last, First, Middle Initial)
Patrick Dwyer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Consumer & Public Affairs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2007

Transaction ID: 20071012-70-14-34

Amount of Each Receipt this Period

26.00

SUBTOTAL of Receipts This Page (optional) ▶

78.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 132
(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

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

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

A.

Full Name (Last, First, Middle Initial)
Patrick Dwyer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Consumer & Public Affairs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	7

Transaction ID: 20071113-70-10-35

Amount of Each Receipt this Period

26.00

B.

Full Name (Last, First, Middle Initial)
Patrick Dwyer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Consumer & Public Affairs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	7

Transaction ID: 20071212-71-9-33

Amount of Each Receipt this Period

26.00

C.

Full Name (Last, First, Middle Initial)
Ann Ehlen

Mailing Address Chauss E De Tervuren 198A

City State Zip Code
Waterloo ZZ ZZZZ-0

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

Name of Employer Occupation
MasterCard Business Leader, Product Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	7

Transaction ID: 5b4a46254d33a1421ea

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

302.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 132
(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

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

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

A.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt: 07 / 15 / 2007
Transaction ID: 20070711-57-13-14
 Amount of Each Receipt this Period: 125.00

B.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt: 08 / 15 / 2007
Transaction ID: 20070814-57-11-1
 Amount of Each Receipt this Period: 125.00

C.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt: 09 / 15 / 2007
Transaction ID: 20070913-58-14-12
 Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 132
	<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Michael Ellison		Date of Receipt MM / DD / YYYY 10 / 15 / 2007		
	Mailing Address 2000 Purchase Street		Transaction ID: 20071012-58-14-34		
	City Purchase	State NY	Zip Code 10577-2509	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation VP/Financial Analysis			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1125.00			

B.	Full Name (Last, First, Middle Initial) Michael Ellison		Date of Receipt MM / DD / YYYY 11 / 15 / 2007		
	Mailing Address 2000 Purchase Street		Transaction ID: 20071113-58-10-35		
	City Purchase	State NY	Zip Code 10577-2509	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation VP/Financial Analysis			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1125.00			

C.	Full Name (Last, First, Middle Initial) Michael Ellison		Date of Receipt MM / DD / YYYY 12 / 15 / 2007		
	Mailing Address 2000 Purchase Street		Transaction ID: 20071212-58-9-33		
	City Purchase	State NY	Zip Code 10577-2509	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation VP/Financial Analysis			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1125.00			

SUBTOTAL of Receipts This Page (optional)	▶	375.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 132
(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

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

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

A.

Full Name (Last, First, Middle Initial)
Anna May Feige

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Global Group Practice Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2320.00

Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-9-13-14
Amount of Each Receipt this Period 290.00

B.

Full Name (Last, First, Middle Initial)
Anna May Feige

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Global Group Practice Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2320.00

Date of Receipt 08 / 15 / 2007
Transaction ID: 20070814-9-11-1
Amount of Each Receipt this Period 290.00

C.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Marking Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3328.00

Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-11-13-14
Amount of Each Receipt this Period 416.00

SUBTOTAL of Receipts This Page (optional) ► 996.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Lawrence Flanagan
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Chief Marking Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3328.00
Date of Receipt 08 / 15 / 2007
Transaction ID: 20070814-11-11-1
Amount of Each Receipt this Period 416.00

B. Full Name (Last, First, Middle Initial)
Lawrence Flanagan
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Chief Marking Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3328.00
Date of Receipt 09 / 15 / 2007
Transaction ID: 20070913-10-14-12
Amount of Each Receipt this Period 416.00

C. Full Name (Last, First, Middle Initial)
Lawrence Flanagan
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Chief Marking Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3328.00
Date of Receipt 10 / 15 / 2007
Transaction ID: 20071012-10-14-34
Amount of Each Receipt this Period 416.00

SUBTOTAL of Receipts This Page (optional) ► 1248.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 132
(check only one)

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

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

A.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Marking Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3328.00

Date of Receipt 11 / 15 / 2007

Transaction ID: 20071113-10-10-35

Amount of Each Receipt this Period 416.00

B.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Marking Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3328.00

Date of Receipt 12 / 15 / 2007

Transaction ID: 20071212-10-9-33

Amount of Each Receipt this Period 416.00

C.

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

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 18 / 2007

Transaction ID: 9042ba7ee34f8350457

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► 957.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 132
(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

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

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

A.

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

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 18 / 2007

Transaction ID: 17ecf440a3495bd8698

Amount of Each Receipt this Period 125.00

B.

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

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 18 / 2007

Transaction ID: 6ad1749e4882d34aa2e

Amount of Each Receipt this Period 125.00

C.

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

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 18 / 2007

Transaction ID: 4d566c89bc534cc8d01

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► 375.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 132
(check only one)

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

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

A.

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

Mailing Address 1401 Eye Street Northwest Suite 2

City State Zip Code
Washington DC 20005-2225

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

Name of Employer Occupation
MasterCard Business Leader, Public Policy

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 7

Transaction ID: 0991dd796ed87034afb

Amount of Each Receipt this Period

125.00

B.

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

Mailing Address 1401 Eye Street Northwest Suite 2

City State Zip Code
Washington DC 20005-2225

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

Name of Employer Occupation
MasterCard Business Leader, Public Policy

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: ebf81fddd940c16a04c

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
Gareth Forsey

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP/Cust Business Plan/Analys

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-56-13-14

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional) ▶

540.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 132
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial) Gareth Forsey		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 2000 Purchase Street		Transaction ID: 20070814-56-11-1
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Cust Business Plan/Analys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

B.

Full Name (Last, First, Middle Initial) Gareth Forsey		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
Mailing Address 2000 Purchase Street		Transaction ID: 20070913-57-14-12
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Cust Business Plan/Analys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

C.

Full Name (Last, First, Middle Initial) Gareth Forsey		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2000 Purchase Street		Transaction ID: 20071012-57-14-34
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Cust Business Plan/Analys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

SUBTOTAL of Receipts This Page (optional)	870.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Gareth Forsey

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP/Cust Business Plan/Analys

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-57-10-35

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)
Gareth Forsey

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP/Cust Business Plan/Analys

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-57-9-33

Amount of Each Receipt this Period

290.00

C.

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

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-12-13-14

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional) ▶

704.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) John Gallagher		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 2000 Purchase Street		Transaction ID: 20070814-12-11-1
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation VP/Financial Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

B.

Full Name (Last, First, Middle Initial) John Gallagher		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
Mailing Address 2000 Purchase Street		Transaction ID: 20070913-11-14-12
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation VP/Financial Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

C.

Full Name (Last, First, Middle Initial) John Gallagher		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2000 Purchase Street		Transaction ID: 20071012-11-14-34
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation VP/Financial Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

SUBTOTAL of Receipts This Page (optional)	372.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 132
(check only one)

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

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

A.

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

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-11-10-35

Amount of Each Receipt this Period

124.00

B.

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

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-11-9-33

Amount of Each Receipt this Period

124.00

C.

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

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard General Counsel

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

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 0 7

Transaction ID: 1cf460fc8769c6b35ef

Amount of Each Receipt this Period

454.54

SUBTOTAL of Receipts This Page (optional) ▶

702.54

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 132
	<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Noah Hanft	Date of Receipt MM / DD / YYYY 08 / 14 / 2007
	Mailing Address 2000 Purchase Street	Transaction ID: 96ec1a917d5e0eb201c
	City Purchase State NY Zip Code 10577-2509	Amount of Each Receipt this Period 454.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Noah Hanft	Date of Receipt MM / DD / YYYY 11 / 07 / 2007
	Mailing Address 2000 Purchase Street	Transaction ID: 2RYHUC218364
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 909.11
	FEC ID number of contributing federal political committee. C	Batch Tool - Mastercard
	Name of Employer MasterCard Occupation General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Noah Hanft	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 2000 Purchase Street	Transaction ID: 0171241
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 909.11
	FEC ID number of contributing federal political committee. C	Batch Tool - Mastercard
	Name of Employer MasterCard Occupation General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	2272.76
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt: 07 / 15 / 2007
Transaction ID: 20070711-15-13-14
 Amount of Each Receipt this Period: 416.00

B. Full Name (Last, First, Middle Initial)
Alan Heuer

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt: 08 / 15 / 2007
Transaction ID: 20070814-15-11-1
 Amount of Each Receipt this Period: 416.00

C. Full Name (Last, First, Middle Initial)
Alan Heuer

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt: 09 / 15 / 2007
Transaction ID: 20070913-15-14-12
 Amount of Each Receipt this Period: 416.00

SUBTOTAL of Receipts This Page (optional) ► 1248.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 132

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Alan Heuer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Chief Operating Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: 20071012-15-14-34

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)
Alan Heuer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Chief Operating Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-15-10-35

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)
Alan Heuer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Chief Operating Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-15-9-33

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional) ▶

1248.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Robert Hoffman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 453.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2007

Transaction ID: 20070711-16-13-14

Amount of Each Receipt this Period
33.50

B.

Full Name (Last, First, Middle Initial)
Robert Hoffman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 453.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: 20070814-16-11-1

Amount of Each Receipt this Period
33.50

C.

Full Name (Last, First, Middle Initial)
Robert Hoffman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 453.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2007

Transaction ID: 20070913-16-14-12

Amount of Each Receipt this Period
33.50

SUBTOTAL of Receipts This Page (optional) ► **100.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Robert Hoffman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 453.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: 20071012-16-14-34

Amount of Each Receipt this Period
33.50

B.

Full Name (Last, First, Middle Initial)
Robert Hoffman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 453.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-16-10-35

Amount of Each Receipt this Period
33.50

C.

Full Name (Last, First, Middle Initial)
Robert Hoffman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 453.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-16-9-33

Amount of Each Receipt this Period
33.50

SUBTOTAL of Receipts This Page (optional) ► **100.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 132
(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

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

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

A.

Full Name (Last, First, Middle Initial)
Greg Howes

Mailing Address PO Box 25000

City Raleigh State NC Zip Code 27640-0045

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

Name of Employer MasterCard Occupation Global Solutions Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 15 / 2007

Transaction ID: 20070711-17-13-14

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Greg Howes

Mailing Address PO Box 25000

City Raleigh State NC Zip Code 27640-0045

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

Name of Employer MasterCard Occupation Global Solutions Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 15 / 2007

Transaction ID: 20070814-17-11-1

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Greg Howes

Mailing Address PO Box 25000

City Raleigh State NC Zip Code 27640-0045

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

Name of Employer MasterCard Occupation Global Solutions Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 15 / 2007

Transaction ID: 20070913-17-14-12

Amount of Each Receipt this Period 100.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 132
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Greg Howes		Date of Receipt
	Mailing Address PO Box 25000		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Raleigh	NC	27640-0045
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MasterCard		Occupation Global Solutions Leader	Transaction ID: 20071012-17-14-34
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="800.00"/>	<input type="text" value="100.00"/>

B.	Full Name (Last, First, Middle Initial) Greg Howes		Date of Receipt
	Mailing Address PO Box 25000		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Raleigh	NC	27640-0045
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MasterCard		Occupation Global Solutions Leader	Transaction ID: 20071113-17-10-35
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="800.00"/>	<input type="text" value="100.00"/>

C.	Full Name (Last, First, Middle Initial) Greg Howes		Date of Receipt
	Mailing Address PO Box 25000		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Raleigh	NC	27640-0045
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MasterCard		Occupation Global Solutions Leader	Transaction ID: 20071212-17-9-33
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="800.00"/>	<input type="text" value="100.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 132

(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

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

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

A.

Full Name (Last, First, Middle Initial)
James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Engineering Svcs

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2007

Transaction ID: 20070711-63-13-14

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)
James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Engineering Svcs

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: 20070814-63-11-1

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)
James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Engineering Svcs

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2007

Transaction ID: 20070913-64-14-12

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Group Head, Engineering Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2007

Transaction ID: 20071012-64-14-34

Amount of Each Receipt this Period
124.00

B.

Full Name (Last, First, Middle Initial)
James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Group Head, Engineering Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: 20071113-64-10-35

Amount of Each Receipt this Period
124.00

C.

Full Name (Last, First, Middle Initial)
James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Group Head, Engineering Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2007

Transaction ID: 20071212-65-9-33

Amount of Each Receipt this Period
124.00

SUBTOTAL of Receipts This Page (optional) ► **372.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 132

(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

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

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

A.

Full Name (Last, First, Middle Initial)
Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard SVP/Systems Enhancement Stratg

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2007

Transaction ID: 20070711-18-13-14

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)
Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard SVP/Systems Enhancement Stratg

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: 20070814-18-11-1

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)
Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard SVP/Systems Enhancement Stratg

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2007

Transaction ID: 20070913-18-14-12

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional)

870.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 132
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

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

A.

Full Name (Last, First, Middle Initial) Joan Kelly		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071012-18-14-34
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Systems Enhancement Stratg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

B.

Full Name (Last, First, Middle Initial) Joan Kelly		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071113-18-10-35
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Systems Enhancement Stratg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

C.

Full Name (Last, First, Middle Initial) Joan Kelly		Date of Receipt MM / DD / YYYY 12 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071212-18-9-33
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Systems Enhancement Stratg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

SUBTOTAL of Receipts This Page (optional)	870.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 43 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 1401 Eye Street Northwest Suite 2

City State Zip Code
Washington DC 20005-2225

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

Name of Employer Occupation
MasterCard VP/NA Business Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2007

Transaction ID: 20071012-19-14-34

Amount of Each Receipt this Period
35.00

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

Mailing Address 1401 Eye Street Northwest Suite 2

City State Zip Code
Washington DC 20005-2225

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

Name of Employer Occupation
MasterCard VP/NA Business Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: 20071113-19-10-35

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Mike Kelly

Mailing Address 1401 Eye Street Northwest Suite 2

City State Zip Code
Washington DC 20005-2225

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

Name of Employer Occupation
MasterCard VP/NA Business Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2007

Transaction ID: 20071212-19-9-33

Amount of Each Receipt this Period
35.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Claire Le Gal
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Business Leader, Fraud Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-20-13-14
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Claire Le Gal
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Business Leader, Fraud Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 08 / 15 / 2007
Transaction ID: 20070814-20-11-1
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Claire Le Gal
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Business Leader, Fraud Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 09 / 15 / 2007
Transaction ID: 20070913-20-14-12
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 132

(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

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

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

A.

Full Name (Last, First, Middle Initial)
Claire Le Gal

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Business Leader, Fraud Management

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: 20071012-20-14-34

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Claire Le Gal

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Business Leader, Fraud Management

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-20-10-35

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Claire Le Gal

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Business Leader, Fraud Management

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-20-9-33

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Pamela Leach
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 07 15 2007
Transaction ID: 20070711-21-13-14
 Amount of Each Receipt this Period
 145.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation SVP/Member Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1160.00

B. Full Name (Last, First, Middle Initial)
Pamela Leach
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 08 15 2007
Transaction ID: 20070814-21-11-1
 Amount of Each Receipt this Period
 145.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation SVP/Member Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1160.00

C. Full Name (Last, First, Middle Initial)
Pamela Leach
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 15 2007
Transaction ID: 20070913-21-14-12
 Amount of Each Receipt this Period
 145.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation SVP/Member Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1160.00

SUBTOTAL of Receipts This Page (optional) ▶ 435.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Member Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1160.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: 20071012-21-14-34

Amount of Each Receipt this Period
145.00

B.

Full Name (Last, First, Middle Initial)
Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Member Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1160.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-21-10-35

Amount of Each Receipt this Period
145.00

C.

Full Name (Last, First, Middle Initial)
Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Member Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1160.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-21-9-33

Amount of Each Receipt this Period
145.00

SUBTOTAL of Receipts This Page (optional) ► **435.00**

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

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

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

FOR LINE NUMBER: PAGE 48 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 5555 Winghaven Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 09 / 15 / 2007
Transaction ID: 20070913-22-14-12
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Randall Leonard

Mailing Address 5555 Winghaven Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 10 / 15 / 2007
Transaction ID: 20071012-22-14-34
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Randall Leonard

Mailing Address 5555 Winghaven Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: 20071113-22-10-35
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 132

(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

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

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

A.

Full Name (Last, First, Middle Initial)
Randall Leonard

Mailing Address 5555 Winghaven Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-22-9-33

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Mary Lester

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Bus Resources-Communication

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: fecf7e4d07f1b3273ca

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Linda Locke

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Public Relations

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 744.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-47-13-14

Amount of Each Receipt this Period

62.00

SUBTOTAL of Receipts This Page (optional)

337.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 132
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

A.	Full Name (Last, First, Middle Initial) Linda Locke		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 2000 Purchase Street		Transaction ID: 20070814-47-11-1
	City Purchase	State NY	Zip Code 10577-2509
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.00
	Name of Employer MasterCard	Occupation VP/Public Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 744.00	

B.	Full Name (Last, First, Middle Initial) Linda Locke		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
	Mailing Address 2000 Purchase Street		Transaction ID: 20070913-48-14-12
	City Purchase	State NY	Zip Code 10577-2509
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.00
	Name of Employer MasterCard	Occupation VP/Public Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 744.00	

C.	Full Name (Last, First, Middle Initial) Linda Locke		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
	Mailing Address 2000 Purchase Street		Transaction ID: 20071012-48-14-34
	City Purchase	State NY	Zip Code 10577-2509
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.00
	Name of Employer MasterCard	Occupation VP/Public Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 744.00	

SUBTOTAL of Receipts This Page (optional)	186.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 51 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Public Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 744.00

Date of Receipt 11 / 15 / 2007
Transaction ID: 20071113-48-10-35
 Amount of Each Receipt this Period 62.00

B. Full Name (Last, First, Middle Initial)
Linda Locke

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Public Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 744.00

Date of Receipt 12 / 15 / 2007
Transaction ID: 20071212-48-9-33
 Amount of Each Receipt this Period 62.00

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

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation SVP/Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-24-13-14
 Amount of Each Receipt this Period 290.00

SUBTOTAL of Receipts This Page (optional) ► 414.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 132
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial) Michael Manchisi		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070814-24-11-1
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

B.

Full Name (Last, First, Middle Initial) Michael Manchisi		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070913-24-14-12
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

C.

Full Name (Last, First, Middle Initial) Michael Manchisi		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071012-24-14-34
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

SUBTOTAL of Receipts This Page (optional)	870.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Michael Manchisi		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071113-24-10-35
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

B.

Full Name (Last, First, Middle Initial) Michael Manchisi		Date of Receipt MM / DD / YYYY 12 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071212-24-9-33
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

C.

Full Name (Last, First, Middle Initial) Kimberly Martin		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070814-26-11-1
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer MasterCard	Occupation VP/Systems Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	620.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 132

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2007

Transaction ID: 20070913-26-14-12

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2007

Transaction ID: 20071012-26-14-34

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 15 / 2007

Transaction ID: 20071113-26-10-35

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 132

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-26-9-33

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
Bill Mathis

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP/Account Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-72-13-14

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)
Bill Mathis

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP/Account Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: 20070814-72-11-1

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional) ▶

620.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Bill Mathis

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer MasterCard Occupation SVP/Account Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2007

Transaction ID: 20070913-73-14-12

Amount of Each Receipt this Period
290.00

B.

Full Name (Last, First, Middle Initial)
Bill Mathis

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer MasterCard Occupation SVP/Account Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 15 / 2007

Transaction ID: 20071012-73-14-34

Amount of Each Receipt this Period
290.00

C.

Full Name (Last, First, Middle Initial)
Bill Mathis

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer MasterCard Occupation SVP/Account Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2007

Transaction ID: 20071113-73-10-35

Amount of Each Receipt this Period
290.00

SUBTOTAL of Receipts This Page (optional) ► **870.00**

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

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

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

FOR LINE NUMBER: PAGE 57 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Bill Mathis
Mailing Address 100 Manhattanville Road
City State Zip Code
Purchase NY 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation SVP/Account Leader
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3480.00
Date of Receipt 12 / 15 / 2007
Transaction ID: 20071212-74-9-33
Amount of Each Receipt this Period 290.00

B. Full Name (Last, First, Middle Initial)
John McAndrew
Mailing Address 2000 Purchase Street
City State Zip Code
Purchase NY 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Tax
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3480.00
Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-27-13-14
Amount of Each Receipt this Period 290.00

C. Full Name (Last, First, Middle Initial)
John McAndrew
Mailing Address 2000 Purchase Street
City State Zip Code
Purchase NY 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Tax
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3480.00
Date of Receipt 08 / 15 / 2007
Transaction ID: 20070814-27-11-1
Amount of Each Receipt this Period 290.00

SUBTOTAL of Receipts This Page (optional) ► 870.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 58 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
John McAndrew
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Tax
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3480.00
Date of Receipt 09 / 15 / 2007
Transaction ID: 20070913-27-14-12
Amount of Each Receipt this Period 290.00

B. Full Name (Last, First, Middle Initial)
John McAndrew
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Tax
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3480.00
Date of Receipt 10 / 15 / 2007
Transaction ID: 20071012-27-14-34
Amount of Each Receipt this Period 290.00

C. Full Name (Last, First, Middle Initial)
John McAndrew
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Tax
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3480.00
Date of Receipt 11 / 15 / 2007
Transaction ID: 20071113-27-10-35
Amount of Each Receipt this Period 290.00

SUBTOTAL of Receipts This Page (optional) ► 870.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 132

(check only one)

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

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

A.

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

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Tax

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-27-9-33

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)
Ed McCraw

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Senior Business Leader, Corporate Comm

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

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-50-13-14

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
Ed McCraw

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Senior Business Leader, Corporate Comm

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

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: 20070814-50-11-1

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional) ▶

540.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 132
	<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Ed McCraw		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2007
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070913-51-14-12
Name of Employer MasterCard		Occupation Senior Business Leader, Corporate Comm	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	125.00

B.	Full Name (Last, First, Middle Initial) Ed McCraw		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 15 / 2007
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee. C		Transaction ID: 20071012-51-14-34
Name of Employer MasterCard		Occupation Senior Business Leader, Corporate Comm	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	125.00

C.	Full Name (Last, First, Middle Initial) Ed McCraw		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 15 / 2007
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee. C		Transaction ID: 20071113-51-10-35
Name of Employer MasterCard		Occupation Senior Business Leader, Corporate Comm	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	125.00

SUBTOTAL of Receipts This Page (optional)	375.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Ed McCraw

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Senior Business Leader, Corporate Comm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
12 / 15 / 2007

Transaction ID: 20071212-51-9-33

Amount of Each Receipt this Period: 125.00

B.

Full Name (Last, First, Middle Initial)
Chris McWilton

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.04

Date of Receipt: MM / DD / YYYY
07 / 15 / 2007

Transaction ID: 20070711-51-13-14

Amount of Each Receipt this Period: 291.67

C.

Full Name (Last, First, Middle Initial)
Chris McWilton

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.04

Date of Receipt: MM / DD / YYYY
08 / 15 / 2007

Transaction ID: 20070814-51-11-1

Amount of Each Receipt this Period: 291.67

SUBTOTAL of Receipts This Page (optional) ► **708.34**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 132		
	<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

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

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

A.	Full Name (Last, First, Middle Initial) Chris McWilton		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070913-52-14-12
Name of Employer MasterCard		Occupation Chief Financial Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="291.67"/>
		<input type="text" value="3500.04"/>	

B.	Full Name (Last, First, Middle Initial) Chris McWilton		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee. C		Transaction ID: 20071012-52-14-34
Name of Employer MasterCard		Occupation Chief Financial Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="291.67"/>
		<input type="text" value="3500.04"/>	

C.	Full Name (Last, First, Middle Initial) Chris McWilton		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee. C		Transaction ID: 20071113-52-10-35
Name of Employer MasterCard		Occupation Chief Financial Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="291.67"/>
		<input type="text" value="3500.04"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="875.01"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Chris McWilton

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Chief Financial Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.04

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-52-9-33

Amount of Each Receipt this Period

291.67

B.

Full Name (Last, First, Middle Initial)
Pamela McWilton

Mailing Address 3 Woodland Dr

City State Zip Code
Rye NY 10580-1036

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

Name of Employer Occupation
Spouse

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

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 1 / 2 0 0 7

Transaction ID: B1J7UQ761364

Amount of Each Receipt this Period

5000.00

Batch Tool - Mastercard

C.

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-52-13-14

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

5391.67

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 64 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 08 / 15 / 2007
Transaction ID: 20070814-52-11-1
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
John Meister

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 09 / 15 / 2007
Transaction ID: 20070913-53-14-12
Amount of Each Receipt this Period: 100.00

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 10 / 15 / 2007
Transaction ID: 20071012-53-14-34
Amount of Each Receipt this Period: 100.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John Meister
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 5 / 2 0 0 7
Transaction ID: 20071113-53-10-35
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Systems Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

B. Full Name (Last, First, Middle Initial)
John Meister
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 5 / 2 0 0 7
Transaction ID: 20071212-53-9-33
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Systems Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

C. Full Name (Last, First, Middle Initial)
Shawn Miles
 Mailing Address 2000 Purchase Street
 City State Zip Code
 Purchase NY 10577-2509
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 1 5 / 2 0 0 7
Transaction ID: 20070711-43-13-14
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Counsel Sr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: 20070814-43-11-1

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 5 / 2 0 0 7

Transaction ID: 20070913-44-14-12

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: 20071012-44-14-34

Amount of Each Receipt this Period
100.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: 20071113-44-10-35
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 12 / 15 / 2007
Transaction ID: 20071212-44-9-33
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Sandy Morris

Mailing Address 2055 Sugarloaf Circle

City Duluth State GA Zip Code 30097

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

Name of Employer MasterCard Occupation SVP/Member Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 07 / 15 / 2007
Transaction ID: 20070711-28-13-14
 Amount of Each Receipt this Period: 124.00

SUBTOTAL of Receipts This Page (optional) ► 324.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Sandy Morris		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 2055 Sugarloaf Circle		Transaction ID: 20070814-28-11-1
City Duluth	State GA	Zip Code 30097
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation SVP/Member Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

B.

Full Name (Last, First, Middle Initial) Sandy Morris		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
Mailing Address 2055 Sugarloaf Circle		Transaction ID: 20070913-28-14-12
City Duluth	State GA	Zip Code 30097
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation SVP/Member Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

C.

Full Name (Last, First, Middle Initial) Sandy Morris		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2055 Sugarloaf Circle		Transaction ID: 20071012-28-14-34
City Duluth	State GA	Zip Code 30097
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation SVP/Member Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

SUBTOTAL of Receipts This Page (optional)	372.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 132
(check only one)

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

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

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

Mailing Address 2055 Sugarloaf Circle

City State Zip Code
Duluth GA 30097

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

Name of Employer MasterCard Occupation SVP/Member Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: 20071113-28-10-35

Amount of Each Receipt this Period: 124.00

B. Full Name (Last, First, Middle Initial)
Sandy Morris

Mailing Address 2055 Sugarloaf Circle

City State Zip Code
Duluth GA 30097

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

Name of Employer MasterCard Occupation SVP/Member Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 12 / 15 / 2007
Transaction ID: 20071212-28-9-33

Amount of Each Receipt this Period: 124.00

C. Full Name (Last, First, Middle Initial)
Timothy Murphy

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt: 07 / 15 / 2007
Transaction ID: 20070711-29-13-14

Amount of Each Receipt this Period: 290.00

SUBTOTAL of Receipts This Page (optional) ► **538.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 132
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial) Timothy Murphy		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 2000 Purchase Street		Transaction ID: 20070814-29-11-1
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

B.

Full Name (Last, First, Middle Initial) Timothy Murphy		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
Mailing Address 2000 Purchase Street		Transaction ID: 20070913-29-14-12
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

C.

Full Name (Last, First, Middle Initial) Timothy Murphy		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2000 Purchase Street		Transaction ID: 20071012-29-14-34
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

SUBTOTAL of Receipts This Page (optional)	870.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 71 / 132

(check only one)

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

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

A.

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

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Associate General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-29-10-35

Amount of Each Receipt this Period

290.00

B.

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

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Associate General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-29-9-33

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code
Miami FL 33131-4945

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

Name of Employer Occupation
MasterCard SVP/Senior Financial Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 992.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-48-13-14

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

704.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 132

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code
Miami FL 33131-4945

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

Name of Employer Occupation
MasterCard SVP/Senior Financial Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 992.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: 20070814-48-11-1

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code
Miami FL 33131-4945

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

Name of Employer Occupation
MasterCard SVP/Senior Financial Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 992.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2007

Transaction ID: 20070913-49-14-12

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code
Miami FL 33131-4945

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

Name of Employer Occupation
MasterCard SVP/Senior Financial Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 992.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2007

Transaction ID: 20071012-49-14-34

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional) ▶

372.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code
Miami FL 33131-4945

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

Name of Employer MasterCard Occupation SVP/Senior Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 992.00

Date of Receipt: 11 / 15 / 2007

Transaction ID: 20071113-49-10-35

Amount of Each Receipt this Period: 124.00

B.

Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code
Miami FL 33131-4945

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

Name of Employer MasterCard Occupation SVP/Senior Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 992.00

Date of Receipt: 12 / 15 / 2007

Transaction ID: 20071212-49-9-33

Amount of Each Receipt this Period: 124.00

C.

Full Name (Last, First, Middle Initial)
Heather Nolan

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer MasterCard Occupation Business Leader, Franchise Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 07 / 15 / 2007

Transaction ID: 20070711-30-13-14

Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 298.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 132
	<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Heather Nolan		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 08 / 15 / 2007
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee.		Transaction ID: 20070814-30-11-1
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer MasterCard		Occupation Business Leader, Franchise Management	<input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 600.00

B.	Full Name (Last, First, Middle Initial) Heather Nolan		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 15 / 2007
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee.		Transaction ID: 20070913-30-14-12
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer MasterCard		Occupation Business Leader, Franchise Management	<input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 600.00

C.	Full Name (Last, First, Middle Initial) Heather Nolan		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 10 / 15 / 2007
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee.		Transaction ID: 20071012-30-14-34
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer MasterCard		Occupation Business Leader, Franchise Management	<input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 600.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Business Leader, Franchise Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 15 / 2007
Transaction ID: 20071113-30-10-35
 Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Heather Nolan

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Business Leader, Franchise Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2007
Transaction ID: 20071212-30-9-33
 Amount of Each Receipt this Period 50.00

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-68-13-14
 Amount of Each Receipt this Period 124.00

SUBTOTAL of Receipts This Page (optional) ► 224.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 132
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt 08 / 15 / 2007

Transaction ID: 20070814-68-11-1

Amount of Each Receipt this Period 124.00

B.

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

Mailing Address 100 Manhattanville Road

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt 09 / 15 / 2007

Transaction ID: 20070913-69-14-12

Amount of Each Receipt this Period 124.00

C.

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

Mailing Address 100 Manhattanville Road

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt 10 / 15 / 2007

Transaction ID: 20071012-69-14-34

Amount of Each Receipt this Period 124.00

SUBTOTAL of Receipts This Page (optional) ► 372.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 132

(check only one)

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

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

A.

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

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-69-10-35

Amount of Each Receipt this Period

124.00

B.

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

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-70-9-33

Amount of Each Receipt this Period

124.00

C.

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

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Accounting

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 7

Transaction ID: 20070913-31-14-12

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

273.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 132
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial) John Pagano		Date of Receipt MM / DD / YYYY 10 / 15 / 2007	
Mailing Address 2000 Purchase Street		Transaction ID: 20071012-31-14-34	
City Purchase	State NY	Zip Code 10577-2509	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation VP/Accounting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B.

Full Name (Last, First, Middle Initial) John Pagano		Date of Receipt MM / DD / YYYY 11 / 15 / 2007	
Mailing Address 2000 Purchase Street		Transaction ID: 20071113-31-10-35	
City Purchase	State NY	Zip Code 10577-2509	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation VP/Accounting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C.

Full Name (Last, First, Middle Initial) John Pagano		Date of Receipt MM / DD / YYYY 12 / 15 / 2007	
Mailing Address 2000 Purchase Street		Transaction ID: 20071212-31-9-33	
City Purchase	State NY	Zip Code 10577-2509	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation VP/Accounting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 132

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Joshua Peirez

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard SVP/Associate General Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4999.64

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2007

Transaction ID: 0558347

Amount of Each Receipt this Period

3749.00

Batch Tool - Mastercard

B.

Full Name (Last, First, Middle Initial)
Douglas Raymond

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2007

Transaction ID: 476a02f62f91c466de2

Amount of Each Receipt this Period

350.00

C.

Full Name (Last, First, Middle Initial)
Douglas Raymond

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard SVP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 26 / 2007

Transaction ID: 61fa4594f89f53e35ec

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional) ▶

4449.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Douglas Raymond

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 11 / 26 / 2007

Transaction ID: 78c82abe1e39e5b020d

Amount of Each Receipt this Period 350.00

B.

Full Name (Last, First, Middle Initial)
Douglas Raymond

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 12 / 26 / 2007

Transaction ID: f46c62c56dceefd2e38

Amount of Each Receipt this Period 350.00

C.

Full Name (Last, First, Middle Initial)
Bob Reany

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Information Tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1320.00

Date of Receipt 07 / 15 / 2007

Transaction ID: 20070711-45-13-14

Amount of Each Receipt this Period 110.00

SUBTOTAL of Receipts This Page (optional) ► **810.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 132
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

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

A.

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070814-45-11-1
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.00
Name of Employer MasterCard	Occupation VP/Information Tech	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1320.00	

B.

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070913-46-14-12
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.00
Name of Employer MasterCard	Occupation VP/Information Tech	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1320.00	

C.

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071012-46-14-34
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.00
Name of Employer MasterCard	Occupation VP/Information Tech	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1320.00	

SUBTOTAL of Receipts This Page (optional)	330.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 132
(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

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

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

A.

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071113-46-10-35
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.00
Name of Employer MasterCard	Occupation VP/Information Tech	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1320.00	

B.

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 12 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071212-46-9-33
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.00
Name of Employer MasterCard	Occupation VP/Information Tech	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1320.00	

C.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 07 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070711-46-13-14
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Systems Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

SUBTOTAL of Receipts This Page (optional)	510.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 132
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070814-46-11-1
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Systems Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

B.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070913-47-14-12
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Systems Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

C.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071012-47-14-34
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Systems Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3480.00	

SUBTOTAL of Receipts This Page (optional)	870.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071113-47-10-35
City O Fallon	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Systems Development	Aggregate Year-to-Date ▼ 3480.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 12 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071212-47-9-33
City O Fallon	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Systems Development	Aggregate Year-to-Date ▼ 3480.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Larry Resch		Date of Receipt MM / DD / YYYY 07 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070711-32-13-14
City O Fallon	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation VP/Processing Svcs	Aggregate Year-to-Date ▼ 1488.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	704.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Larry Resch

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Processing Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: 20070814-32-11-1

Amount of Each Receipt this Period
124.00

B.

Full Name (Last, First, Middle Initial)
Larry Resch

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Processing Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2007

Transaction ID: 20070913-32-14-12

Amount of Each Receipt this Period
124.00

C.

Full Name (Last, First, Middle Initial)
Larry Resch

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Processing Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2007

Transaction ID: 20071012-32-14-34

Amount of Each Receipt this Period
124.00

SUBTOTAL of Receipts This Page (optional) ► **372.00**

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

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

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

FOR LINE NUMBER: PAGE 86 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Processing Svcs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-32-10-35

Amount of Each Receipt this Period
124.00

B. Full Name (Last, First, Middle Initial)
Larry Resch

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Processing Svcs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-32-9-33

Amount of Each Receipt this Period
124.00

C. Full Name (Last, First, Middle Initial)
Nat Paul Rosenberg

Mailing Address 8755 West Higgins Road

City State Zip Code
Chicago IL 60631

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

Name of Employer MasterCard Occupation VP/Team Lead NA Business Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-72-9-33

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► 288.00

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

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

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

FOR LINE NUMBER: PAGE 87 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Bart Rubin
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Counsel Sr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-33-13-14
Amount of Each Receipt this Period 125.00

B. Full Name (Last, First, Middle Initial)
Bart Rubin
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Counsel Sr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 08 / 15 / 2007
Transaction ID: 20070814-33-11-1
Amount of Each Receipt this Period 125.00

C. Full Name (Last, First, Middle Initial)
Bart Rubin
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Counsel Sr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 09 / 15 / 2007
Transaction ID: 20070913-33-14-12
Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► 375.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 132
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Bart Rubin

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 15 / 2007
Transaction ID: 20071012-33-14-34
 Amount of Each Receipt this Period: 125.00

B.

Full Name (Last, First, Middle Initial)
Bart Rubin

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: 20071113-33-10-35
 Amount of Each Receipt this Period: 125.00

C.

Full Name (Last, First, Middle Initial)
Bart Rubin

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 15 / 2007
Transaction ID: 20071212-33-9-33
 Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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

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

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

FOR LINE NUMBER: PAGE 89 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
John Scariot
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 15 / 2007
Transaction ID: 20070711-74-13-14
 Amount of Each Receipt this Period
 124.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Financial Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1240.00

B. Full Name (Last, First, Middle Initial)
John Scariot
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 15 / 2007
Transaction ID: 20070814-74-11-1
 Amount of Each Receipt this Period
 124.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Financial Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1240.00

C. Full Name (Last, First, Middle Initial)
John Scariot
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 15 / 2007
Transaction ID: 20070913-75-14-12
 Amount of Each Receipt this Period
 124.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Financial Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1240.00

SUBTOTAL of Receipts This Page (optional) ► 372.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 / 132
	<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) John Scariot	Date of Receipt MM / DD / YYYY 10 / 15 / 2007
	Mailing Address 2200 Mastercard Boulevard	Transaction ID: 20071012-75-14-34
	City State Zip Code O Fallon MO 63368-7263	Amount of Each Receipt this Period 124.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MasterCard VP/Financial Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

B.	Full Name (Last, First, Middle Initial) Scott Silverthorne	Date of Receipt MM / DD / YYYY 07 / 15 / 2007
	Mailing Address 1401 Eye Street Northwest Suite 2	Transaction ID: 20070711-66-13-14
	City State Zip Code Washington DC 20005-2225	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MasterCard Senior Business Leader, Global Public	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3300.00	

C.	Full Name (Last, First, Middle Initial) Scott Silverthorne	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 1401 Eye Street Northwest Suite 2	Transaction ID: 20070814-66-11-1
	City State Zip Code Washington DC 20005-2225	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MasterCard Senior Business Leader, Global Public	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3300.00	

SUBTOTAL of Receipts This Page (optional)	724.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 132

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Scott Silverthorne

Mailing Address 1401 Eye Street Northwest Suite 2

City State Zip Code
Washington DC 20005-2225

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

Name of Employer MasterCard Occupation Senior Business Leader, Global Public

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2007

Transaction ID: 20070913-67-14-12

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Scott Silverthorne

Mailing Address 1401 Eye Street Northwest Suite 2

City State Zip Code
Washington DC 20005-2225

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

Name of Employer MasterCard Occupation Senior Business Leader, Global Public

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2007

Transaction ID: 20071012-67-14-34

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Scott Silverthorne

Mailing Address 1401 Eye Street Northwest Suite 2

City State Zip Code
Washington DC 20005-2225

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

Name of Employer MasterCard Occupation Senior Business Leader, Global Public

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: 20071113-67-10-35

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

900.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 132
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Scott Silverthorne

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Senior Business Leader, Global Public

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt 12 / 15 / 2007

Transaction ID: 20071212-68-9-33

Amount of Each Receipt this Period 300.00

B.

Full Name (Last, First, Middle Initial)
Eileen Simon

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt 07 / 15 / 2007

Transaction ID: 20070711-67-13-14

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Eileen Simon

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt 08 / 15 / 2007

Transaction ID: 20070814-67-11-1

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ▶ **380.00**

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

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

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

FOR LINE NUMBER: PAGE 93 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Eileen Simon
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Associate General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.00
Date of Receipt 09 / 15 / 2007
Transaction ID: 20070913-68-14-12
Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Eileen Simon
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Associate General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.00
Date of Receipt 10 / 15 / 2007
Transaction ID: 20071012-68-14-34
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Eileen Simon
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Associate General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.00
Date of Receipt 11 / 15 / 2007
Transaction ID: 20071113-68-10-35
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 120.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 94 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Eileen Simon
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2509
 Date of Receipt 12 / 15 / 2007
Transaction ID: 20071212-69-9-33
 Amount of Each Receipt this Period 40.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 430.00

B. Full Name (Last, First, Middle Initial)
Edgar Smart
 Mailing Address 2200 Mastercard Boulevard
 City O Fallon State MO Zip Code 63368-7263
 Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-53-13-14
 Amount of Each Receipt this Period 124.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Systems Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 1488.00

C. Full Name (Last, First, Middle Initial)
Edgar Smart
 Mailing Address 2200 Mastercard Boulevard
 City O Fallon State MO Zip Code 63368-7263
 Date of Receipt 08 / 15 / 2007
Transaction ID: 20070814-53-11-1
 Amount of Each Receipt this Period 124.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MasterCard Occupation VP/Systems Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 1488.00

SUBTOTAL of Receipts This Page (optional) ► 288.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 132
(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

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

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

A.

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Support

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2007

Transaction ID: 20070913-54-14-12

Amount of Each Receipt this Period

124.00

B.

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Support

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2007

Transaction ID: 20071012-54-14-34

Amount of Each Receipt this Period

124.00

C.

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Support

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 15 / 2007

Transaction ID: 20071113-54-10-35

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 96 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2007

Transaction ID: 20071212-54-9-33

Amount of Each Receipt this Period
124.00

B. Full Name (Last, First, Middle Initial)
Carey Smith

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Risk Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2007

Transaction ID: 20070711-54-13-14

Amount of Each Receipt this Period
124.00

C. Full Name (Last, First, Middle Initial)
Carey Smith

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Risk Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: 20070814-54-11-1

Amount of Each Receipt this Period
124.00

SUBTOTAL of Receipts This Page (optional) ► 372.00

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

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

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

FOR LINE NUMBER: PAGE 97 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 09 / 15 / 2007
Transaction ID: 20070913-55-14-12
 Amount of Each Receipt this Period: 124.00

B. Full Name (Last, First, Middle Initial)
Carey Smith

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 10 / 15 / 2007
Transaction ID: 20071012-55-14-34
 Amount of Each Receipt this Period: 124.00

C. Full Name (Last, First, Middle Initial)
Carey Smith

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: 20071113-55-10-35
 Amount of Each Receipt this Period: 124.00

SUBTOTAL of Receipts This Page (optional) ► 372.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 / 132
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Carey Smith

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: MM / DD / YYYY
12 / 15 / 2007

Transaction ID: 20071212-55-9-33

Amount of Each Receipt this Period: 124.00

B.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63366-7263

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

Name of Employer MasterCard Occupation General Manager, Eastern Europe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: MM / DD / YYYY
09 / 30 / 2007

Transaction ID: 20070913-60-14-12

Amount of Each Receipt this Period: 42.00

C.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63366-7263

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

Name of Employer MasterCard Occupation General Manager, Eastern Europe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: MM / DD / YYYY
10 / 31 / 2007

Transaction ID: 20071012-60-14-34

Amount of Each Receipt this Period: 42.00

SUBTOTAL of Receipts This Page (optional) ► 208.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 132

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63366-7263

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

Name of Employer Occupation
MasterCard General Manager, Eastern Europe

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071113-60-10-35

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63366-7263

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

Name of Employer Occupation
MasterCard General Manager, Eastern Europe

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 20071212-60-9-33

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)
Ron Steinbruegge

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Network Communic

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-60-13-14

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional) ▶

208.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 132
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Ron Steinbruegge

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Network Communic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: 20070814-60-11-1

Amount of Each Receipt this Period
124.00

B.

Full Name (Last, First, Middle Initial)
Ron Steinbruegge

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Network Communic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2007

Transaction ID: 20070913-61-14-12

Amount of Each Receipt this Period
124.00

C.

Full Name (Last, First, Middle Initial)
Ron Steinbruegge

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Network Communic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2007

Transaction ID: 20071012-61-14-34

Amount of Each Receipt this Period
124.00

SUBTOTAL of Receipts This Page (optional) ► **372.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Ron Steinbruegge

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Network Communic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-61-10-35

Amount of Each Receipt this Period
124.00

B.

Full Name (Last, First, Middle Initial)
Ron Steinbruegge

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Network Communic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-61-9-33

Amount of Each Receipt this Period
124.00

C.

Full Name (Last, First, Middle Initial)
Joseph Swezey

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-49-13-14

Amount of Each Receipt this Period
124.00

SUBTOTAL of Receipts This Page (optional) ► **372.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 132
(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

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

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 08 / 15 / 2007
Transaction ID: 20070814-49-11-1
 Amount of Each Receipt this Period: 124.00

B. Full Name (Last, First, Middle Initial)
Joseph Swezey

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 09 / 15 / 2007
Transaction ID: 20070913-50-14-12
 Amount of Each Receipt this Period: 124.00

C. Full Name (Last, First, Middle Initial)
Joseph Swezey

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 10 / 15 / 2007
Transaction ID: 20071012-50-14-34
 Amount of Each Receipt this Period: 124.00

SUBTOTAL of Receipts This Page (optional) ► **372.00**

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

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

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

FOR LINE NUMBER: PAGE 103 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Joseph Swezey
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Financial Analysis
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00
Date of Receipt 11 / 15 / 2007
Transaction ID: 20071113-50-10-35
Amount of Each Receipt this Period 124.00

B. Full Name (Last, First, Middle Initial)
Joseph Swezey
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Financial Analysis
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00
Date of Receipt 12 / 15 / 2007
Transaction ID: 20071212-50-9-33
Amount of Each Receipt this Period 124.00

C. Full Name (Last, First, Middle Initial)
Donna Terman
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2509
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Bus Resources-Communication
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 744.00
Date of Receipt 07 / 15 / 2007
Transaction ID: 20070711-35-13-14
Amount of Each Receipt this Period 62.00

SUBTOTAL of Receipts This Page (optional) ► 310.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A.

Full Name (Last, First, Middle Initial)
Donna Terman

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Bus Resources-Communication

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 744.00

Date of Receipt 08 / 15 / 2007
Transaction ID: 20070814-35-11-1
 Amount of Each Receipt this Period 62.00

B.

Full Name (Last, First, Middle Initial)
Donna Terman

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Bus Resources-Communication

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 744.00

Date of Receipt 09 / 15 / 2007
Transaction ID: 20070913-36-14-12
 Amount of Each Receipt this Period 62.00

C.

Full Name (Last, First, Middle Initial)
Donna Terman

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Bus Resources-Communication

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 744.00

Date of Receipt 10 / 15 / 2007
Transaction ID: 20071012-36-14-34
 Amount of Each Receipt this Period 62.00

SUBTOTAL of Receipts This Page (optional) ► **186.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Donna Terman

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Bus Resources-Communication

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 744.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-36-10-35

Amount of Each Receipt this Period

62.00

B.

Full Name (Last, First, Middle Initial)
Donna Terman

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Bus Resources-Communication

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 744.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-36-9-33

Amount of Each Receipt this Period

62.00

C.

Full Name (Last, First, Middle Initial)
Robert Trende

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

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

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-37-13-14

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

174.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

<p>A. Full Name (Last, First, Middle Initial) Robert Trende</p> <p>Mailing Address 2200 Mastercard Boulevard</p> <p>City State Zip Code O Fallon MO 63368-7263</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer MasterCard</p> <p>Occupation VP/Systems Development</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>	<p>Date of Receipt 08 / 15 / 2007</p> <p>Transaction ID: 20070814-37-11-1</p> <p>Amount of Each Receipt this Period 50.00</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Robert Trende</p> <p>Mailing Address 2200 Mastercard Boulevard</p> <p>City State Zip Code O Fallon MO 63368-7263</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer MasterCard</p> <p>Occupation VP/Systems Development</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>	<p>Date of Receipt 09 / 15 / 2007</p> <p>Transaction ID: 20070913-38-14-12</p> <p>Amount of Each Receipt this Period 50.00</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Robert Trende</p> <p>Mailing Address 2200 Mastercard Boulevard</p> <p>City State Zip Code O Fallon MO 63368-7263</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer MasterCard</p> <p>Occupation VP/Systems Development</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>	<p>Date of Receipt 10 / 15 / 2007</p> <p>Transaction ID: 20071012-38-14-34</p> <p>Amount of Each Receipt this Period 50.00</p>
--	---

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 107 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Robert Trende
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 5 / 2 0 0 7
Transaction ID: 20071113-38-10-35
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MasterCard VP/Systems Development
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

B. Full Name (Last, First, Middle Initial)
Robert Trende
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 5 / 2 0 0 7
Transaction ID: 20071212-38-9-33
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MasterCard VP/Systems Development
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

C. Full Name (Last, First, Middle Initial)
Frank Tufano
 Mailing Address 2000 Purchase Street
 City State Zip Code
 Purchase NY 10577-2509
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 1 5 / 2 0 0 7
Transaction ID: 20070711-61-13-14
 Amount of Each Receipt this Period
 290.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MasterCard Group Head Finance
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

SUBTOTAL of Receipts This Page (optional) ► 390.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 108 / 132
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Group Head Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: 20070814-61-11-1

Amount of Each Receipt this Period
290.00

B. Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Group Head Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2007

Transaction ID: 20070913-62-14-12

Amount of Each Receipt this Period
290.00

C. Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Group Head Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2007

Transaction ID: 20071012-62-14-34

Amount of Each Receipt this Period
290.00

SUBTOTAL of Receipts This Page (optional) ► **870.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Group Head Finance

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071113-62-10-35

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard Group Head Finance

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-62-9-33

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)
Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Financial Systems

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: 20070814-38-11-1

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

655.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 / 132
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Timothy Westendorf		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070913-39-14-12
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer MasterCard	Occupation VP/Financial Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

B.

Full Name (Last, First, Middle Initial) Timothy Westendorf		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071012-39-14-34
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer MasterCard	Occupation VP/Financial Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

C.

Full Name (Last, First, Middle Initial) Timothy Westendorf		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071113-39-10-35
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer MasterCard	Occupation VP/Financial Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 / 132
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Timothy Westendorf	Date of Receipt MM / DD / YYYY 12 / 15 / 2007
	Mailing Address 2200 Mastercard Boulevard	Transaction ID: 20071212-39-9-33
	City State Zip Code O Fallon MO 63368-7263	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MasterCard VP/Financial Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

B.	Full Name (Last, First, Middle Initial) Mimi Wood	Date of Receipt MM / DD / YYYY 07 / 15 / 2007
	Mailing Address 2000 Purchase Street	Transaction ID: 20070711-39-13-14
	City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 124.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MasterCard VP/Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

C.	Full Name (Last, First, Middle Initial) Mimi Wood	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 2000 Purchase Street	Transaction ID: 20070814-39-11-1
	City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 124.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MasterCard VP/Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

SUBTOTAL of Receipts This Page (optional)	323.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 / 132
(check only one)

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

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

A.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 15 / 2007

Transaction ID: 20070913-40-14-12

Amount of Each Receipt this Period
 124.00

B.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2007

Transaction ID: 20071012-40-14-34

Amount of Each Receipt this Period
 124.00

C.

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2007

Transaction ID: 20071113-40-10-35

Amount of Each Receipt this Period
 124.00

SUBTOTAL of Receipts This Page (optional) ► **372.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 132

(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

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

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

A.

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

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer Occupation
MasterCard VP/Human Resources

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-40-9-33

Amount of Each Receipt this Period

124.00

B.

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Business Management

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1560.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 7

Transaction ID: 20070711-41-13-14

Amount of Each Receipt this Period

130.00

C.

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Business Management

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1560.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: 20070814-41-11-1

Amount of Each Receipt this Period

130.00

SUBTOTAL of Receipts This Page (optional) ▶

384.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 132
(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

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

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

A.

Full Name (Last, First, Middle Initial) Kent Young		Date of Receipt MM / DD / YYYY 09 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20070913-42-14-12
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer MasterCard	Occupation VP/Business Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.00	

B.

Full Name (Last, First, Middle Initial) Kent Young		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071012-42-14-34
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer MasterCard	Occupation VP/Business Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.00	

C.

Full Name (Last, First, Middle Initial) Kent Young		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20071113-42-10-35
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer MasterCard	Occupation VP/Business Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.00	

SUBTOTAL of Receipts This Page (optional)	▶	390.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 132
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

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

A.

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Business Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 20071212-42-9-33

Amount of Each Receipt this Period
130.00

SUBTOTAL of Receipts This Page (optional)	▶	130.00
TOTAL This Period (last page this line number only)	▶	62249.32

**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 116 / 132

<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

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

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

A. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Bank Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 11808-42737978696823 Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2007
	Amount of Each Disbursement this Period 93.00
	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 11808-40284365415573 Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2007
	Amount of Each Disbursement this Period 64.22
	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 11808-04150027036666 Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2007
	Amount of Each Disbursement this Period 127.62
	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

284.84

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 117 / 132

<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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 11808-56451052427292 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2007
	Amount of Each Disbursement this Period 99.76
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90285-63735598325730 Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2007
	Amount of Each Disbursement this Period 13.17
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 93263-00881594419479 Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2007
	Amount of Each Disbursement this Period 24.95
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

137.88

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 118 / 132

<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) PNC Bank		Transaction ID: 93263-35726565122604	
	Mailing Address 411 King St.		Date of Disbursement MM / DD / YYYY 12 / 04 / 2007	
	City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 33.76
	Purpose of Disbursement Credit Card Fee		001	
	Candidate Name		Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	33.76
TOTAL This Period (last page this line number only)	▶	456.48

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Baker for Congress Committee	Transaction ID: d5362cfdcd751193c57 Date of Disbursement																			
	Mailing Address Post Office Box 1694	<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>1</td><td>2</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	7	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	7	/	2	0	0	7												
	City Baton Rouge State LA Zip Code 70821	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 2008 Primary	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Richard Baker	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President																				
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: LA District: 06																				

B.	Full Name (Last, First, Middle Initial) Build America Pac	Transaction ID: f64aab30de1fb121cd0 Date of Disbursement																			
	Mailing Address 153-01 Jamaica Avenue Suite 535	<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>1</td><td>0</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	3	0	/	2	0	0	7												
	City Jamaica State NY Zip Code 11432	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 2007 Contribution	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President																				
	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																				
	State: District: Contribution																				

C.	Full Name (Last, First, Middle Initial) Castle Campaign Fund	Transaction ID: 46e6e8d937d7fead040 Date of Disbursement																			
	Mailing Address PO Box 133	<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>1</td><td>2</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	7	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	7	/	2	0	0	7												
	City Wilmington State DE Zip Code 19899	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 2008 Primary	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Michael Castle	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President																				
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: DE District: 01																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>4500.00</td></tr></table>	4500.00
4500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 120 / 132

<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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Clarke for Congress <hr/> Mailing Address 111-36 200th Street <hr/> City Hollis State NY Zip Code 11412 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Yvette Clarke <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 11 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 197c90101083e7af62c Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Committee To Elect Chris Murphy <hr/> Mailing Address PO Box 127 <hr/> City Cheshire State CT Zip Code 06410 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Christopher Murphy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 35380-1303064227104 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 7
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Committee To Re-Elect Nydia M. Velazquez To Congress <hr/> Mailing Address 315 Inspiration Lane <hr/> City Gaithersburg State MD Zip Code 20878 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Nydia Velazquez <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 12 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: c6cab64ef0f479fd14b Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
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)

PAGE 121 / 132

<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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Crowley for Congress <hr/> Mailing Address 84-56 Grand Avenue <hr/> City Elmhurst State NY Zip Code 11373 Purpose of Disbursement 2008 Primary Candidate Name Joseph Crowley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 23622-5624811053276 Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2007
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ed Royce for Congress <hr/> Mailing Address PO Box 2525 <hr/> City Orange State CA Zip Code 92859 Purpose of Disbursement 2008 Primary Candidate Name Edward Royce Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: c37e0e4a0600e116ac7 Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Elizabeth Dole Committee Inc <hr/> Mailing Address PO Box 2918 <hr/> City Raleigh State NC Zip Code 27602 Purpose of Disbursement 2008 Primary Candidate Name Elizabeth Dole Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7fdc4cd734d3c0a3cd0 Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2007
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	(Empty)

**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 122 / 132

<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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC) <hr/> Mailing Address 25 East Main Street Suite 200 <hr/> City Richmond State VA Zip Code 23219 <hr/> Purpose of Disbursement 2007 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 23622-2193414568901 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
	Amount of Each Disbursement this Period 2500.00
	011 Category/ Type
	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution
B. Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC) <hr/> Mailing Address 25 East Main Street Suite 200 <hr/> City Richmond State VA Zip Code 23219 <hr/> Purpose of Disbursement 2007 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 045a0e9479bec898a2b Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 2500.00
	011 Category/ Type
	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution
C. Full Name (Last, First, Middle Initial) Freedom Project; the <hr/> Mailing Address 424 C Street Northeast Basement Unit <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement 2007 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 89480293ec7a8cdd9cc Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 123 / 132

<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)
MasterCard International Inc. Employees' PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Mark Warner</p> <p>Mailing Address 201 North Union Suite 350</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement 2008 Primary</p> <p>Candidate Name Mark Warner</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 129b735ff1cc846b6a5</p> <p>Date of Disbursement 12 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Roy Blunt</p> <p>Mailing Address PO Box 50100</p> <p>City Springfield State MO Zip Code 65805</p> <p>Purpose of Disbursement 2008 Primary</p> <p>Candidate Name Roy Blunt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7244ac1056e0712c4ef</p> <p>Date of Disbursement 12 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Sherrod Brown</p> <p>Mailing Address PO Box 76187 Suite 800</p> <p>City Washington State DC Zip Code 20013</p> <p>Purpose of Disbursement 2012 Primary</p> <p>Candidate Name Sherrod Brown</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5e20ea2458b2c5ed77a</p> <p>Date of Disbursement 10 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER: (check only one)

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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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Hoosiers for Hill <hr/> Mailing Address PO Box 1071 <hr/> City Seymour State IN Zip Code 47274 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Baron Hill <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District: 09	Transaction ID: 35380-1650506854057 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2007
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Contribution
B. Full Name (Last, First, Middle Initial) Jim Jordan for Congress <hr/> Mailing Address 1709 State Route 560 South <hr/> City Urbana State OH Zip Code 43078 <hr/> Purpose of Disbursement 2008 Primary Candidate Name James Jordan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 04	Transaction ID: 21895-0770532488822 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Contribution
C. Full Name (Last, First, Middle Initial) Jobs, Opportunities and Education, Pac (JOE-PAC) <hr/> Mailing Address 84-54 Grand Avenue <hr/> City Elmhurst State NY Zip Code 11373 <hr/> Purpose of Disbursement 2007 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	Transaction ID: 23622-6413690447807 Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2007
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Contribution

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 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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Joe Donnelly for Congress	Transaction ID: 35380-7161981463432
	Mailing Address PO Box 1961	Date of Disbursement 09 / 19 / 2007
	City South Bend State IN Zip Code 46634	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement 2008 Primary	011 Category/ Type
	Candidate Name Joe Donnelly	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 02	

B.	Full Name (Last, First, Middle Initial) Keller for Congress	Transaction ID: 35380-5192224383354
	Mailing Address PO Box 1453	Date of Disbursement 09 / 19 / 2007
	City Orlando State FL Zip Code 32802	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement 2008 Primary	011 Category/ Type
	Candidate Name Ric Keller	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District: 08	

C.	Full Name (Last, First, Middle Initial) Kind for Congress Committee	Transaction ID: 21895-4272424578666
	Mailing Address 205 South 5th Avenue Suite 428	Date of Disbursement 09 / 27 / 2007
	City La Crosse State WI Zip Code 54601	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement 2008 Primary	011 Category/ Type
	Candidate Name Ron Kind	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: WI District: 03	

SUBTOTAL of Disbursements This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Klein for Congress <hr/> Mailing Address 21301 Powerline Road Suite 204 <hr/> City Boca Raton State FL Zip Code 33433 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Ron Klein <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21895-6201898455619 Date of Disbursement 09 / 27 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Contribution
B. Full Name (Last, First, Middle Initial) Latta for Congress <hr/> Mailing Address 300 North Main Street <hr/> City Bowling Green State OH Zip Code 43402 <hr/> Purpose of Disbursement 2007 Special Primary Election Candidate Name Robert Latta <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05 <hr/> Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: e49a16a2f19fa35efd8 Date of Disbursement 10 / 30 / 2007
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Contribution
C. Full Name (Last, First, Middle Initial) Longhorn Pac <hr/> Mailing Address 7315 Wisconsin Avenue Suite 705 East <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement 2007 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 35380-5293847918510 Date of Disbursement 09 / 19 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Melissa Bean for Congress <hr/> Mailing Address Post Office Box 3068 <hr/> City Barrington State IL Zip Code 60010 <hr/> Purpose of Disbursement 2008 General Candidate Name Melissa Bean <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08	Transaction ID: 35380-0133172869682 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2007
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Menendez for Senate <hr/> Mailing Address PO Box 848 <hr/> City Union City State NJ Zip Code 07087 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Robert Menendez <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District:	Transaction ID: 61f736af12000028cd2 Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2007
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Moore for Congress <hr/> Mailing Address PO Box 14631 <hr/> City Shawnee Mission State KS Zip Code 66285 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Dennis Moore <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 03	Transaction ID: 23622-7978174090385 Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2007
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

9500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial)
People for Enterprise Trade and Economic Growth

Mailing Address 7804 Evening Lane

City Alexandria State VA Zip Code 22306

Purpose of Disbursement

2007 Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2007
 Primary General
 Other (specify) ▼

Contribution

Transaction ID: d80aa3f27531b2bb01d

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Price for Congress

Mailing Address PO Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement

2008 Primary

Candidate Name

Thomas Price

Category/
Type

Office Sought: House
 Senate
 President

State: GA District: 06

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Contribution

Transaction ID: bf227f542befc60a192

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Rely on Your Beliefs Fund

Mailing Address 209 Pennsylvania Avenue Southeast

City Washington State DC Zip Code 20003

Purpose of Disbursement

2007 Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2007
 Primary General
 Other (specify) ▼

Contribution

Transaction ID: 65b16a92ecaa70434cc

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Stephanie Tubbs Jones for Us Congress <hr/> Mailing Address 3729 Silsby Road <hr/> City University Heights State OH Zip Code 44118 Purpose of Disbursement 2008 Primary Candidate Name Stephanie Jones Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 11 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 35380-6850702166557 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 7
	Amount of Each Disbursement this Period 2500.00 Category/Type: 011
B. Full Name (Last, First, Middle Initial) Team Sununu <hr/> Mailing Address PO Box 500 <hr/> City Rye State NH Zip Code 03870 Purpose of Disbursement 2008 General Candidate Name John Sununu Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 22216-6962396502494 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7
	Amount of Each Disbursement this Period 2000.00 Category/Type: 011
C. Full Name (Last, First, Middle Initial) Team Sununu <hr/> Mailing Address PO Box 500 <hr/> City Rye State NH Zip Code 03870 Purpose of Disbursement 2008 Primary Candidate Name John Sununu Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 22216-1516839861869 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7
	Amount of Each Disbursement this Period 500.00 Category/Type: 011

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 130 / 132

<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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Texans for Lamar Smith <hr/> Mailing Address PO Box 6155 <hr/> City San Antonio State TX Zip Code 78209 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Lamar Smith <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 21	Transaction ID: 23622-8674737811088 Date of Disbursement 07 / 24 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Tiberi for Congress <hr/> Mailing Address 2021 E Dublin Granville Road Suite 2000 <hr/> City Columbus State OH Zip Code 43229 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Pat Tiberi <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 12	Transaction ID: 35380-8549768328666 Date of Disbursement 09 / 19 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Tim Mahoney for Florida <hr/> Mailing Address 4114 Northlake Boulevard Suite 300 <hr/> City Palm Beach Gardens State FL Zip Code 33410 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Timothy Mahoney <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 16	Transaction ID: 35380-6624414324760 Date of Disbursement 09 / 19 / 2007
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
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)

PAGE 131 / 132

<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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Together for Our Majority Political Action Committee (T-OMPAC)

Mailing Address PO Box 16488

City Arlington State VA Zip Code 22215

Purpose of Disbursement
2007 Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2007
 Primary General
 Other (specify) ▼
Contribution

State: District:

Transaction ID: 5822bbadb8c5acbd9c4
Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Tom Feeney for Congress

Mailing Address PO Box 622345

City Oviedo State FL Zip Code 32762

Purpose of Disbursement
2008 Primary

Candidate Name
Tom Feeney

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼
Contribution

State: FL District: 24

Transaction ID: a6a59fb22dd11685999
Date of Disbursement

12 / 17 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

74000.00

Image# 28990145601

Form/Schedule: **F3X**

Transaction ID:
