

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
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

ADDRESS (number and street) 30 Broad Street
28th Floor
 Check if different than previously reported. (ACC)
New York City NY 10004

2. **FEC IDENTIFICATION NUMBER** C00411173
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 07 01 2005 through 12 31 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Dorothy Cunningham

Signature of Treasurer Electronically Filed by Dorothy Cunningham Date 10 30 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	5									
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">34150.00</td></tr></table>	34150.00										
34150.00												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">7500.00</td></tr></table>	7500.00	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">42650.00</td></tr></table>	42650.00								
7500.00												
42650.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">41650.00</td></tr></table>	41650.00	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">42650.00</td></tr></table>	42650.00								
41650.00												
42650.00												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">5066.33</td></tr></table>	5066.33	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">6066.33</td></tr></table>	6066.33								
5066.33												
6066.33												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">36583.67</td></tr></table>	36583.67	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">36583.67</td></tr></table>	36583.67								
36583.67												
36583.67												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00										
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
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7500.00	42650.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	7500.00	42650.00
(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)	7500.00	42650.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7500.00	42650.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7500.00	42650.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1066.33	1066.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1066.33	1066.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	5000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5066.33	6066.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	5066.33	6066.33

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)	7500.00	42650.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7500.00	42650.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1066.33	1066.33
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1066.33	1066.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

Full Name (Last, First, Middle Initial) A. LEWIS BURLEIGH		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2005	
Mailing Address 1717 ARCH ST		Transaction ID: SA11A1.4204	
City PHILADELPHIA	State PA	Amount of Each Receipt this Period 1000.00	
Zip Code 19103			
FEC ID number of contributing federal political committee. C			
Name of Employer DECHERT, LLP	Occupation PARTNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. DAVID FORTI		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2005	
Mailing Address 1717 ARCH ST		Transaction ID: SA11A1.4206	
City PHILADELPHIA	State PA	Amount of Each Receipt this Period 1000.00	
Zip Code 19103			
FEC ID number of contributing federal political committee. C			
Name of Employer DECHERT LLP	Occupation PARTNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. JEFFREY KRASNOFF		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2005	
Mailing Address 1601 WASHINGTON AVE		Transaction ID: SA11A1.4208	
City MIAMI	State FL	Amount of Each Receipt this Period 1000.00	
Zip Code 33139			
FEC ID number of contributing federal political committee. C			
Name of Employer LNR PROPERTY COOPERATION	Occupation CEO & PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 14
	<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)
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

Full Name (Last, First, Middle Initial) A. DAVID LINDER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 1717 ARCH ST		Transaction ID: SA11A1.4210
City PHILADELPHIA	State PA	Zip Code 19103
Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		
Name of Employer DECHERT	Occupation PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. PATRICK QUINN		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 5
Mailing Address 1 WORLD FINANCIAL CENTER		Transaction ID: SA11A1.4218
City NEW YORK	State NY	Zip Code 10281
Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		
Name of Employer CADWALADER, WICKERSHAM & TAFT	Occupation PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. KEVIN RIORDAN		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 5
Mailing Address 730 THIRD AVE		Transaction ID: SA11A1.4214
City NEW YORK	State NY	Zip Code 10017
Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		
Name of Employer TIAA	Occupation MANAGING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 14
	<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)
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

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

Mailing Address **1 WORLD FINANCIAL CENTER**

City **NEW YORK** State **NY** Zip Code **10281**

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

Name of Employer **CADWALADER, WICKERSHAM & TAFT** Occupation **PARTNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	5

Transaction ID: SA11A1.4220

Amount of Each Receipt this Period

								500.00
--	--	--	--	--	--	--	--	--------

B. Full Name (Last, First, Middle Initial)
JOSEPH ROMANO

Mailing Address **730 THIRD AVE**

City **NEW YORK** State **NY** Zip Code **10017**

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

Name of Employer **TIAA** Occupation **MANAGING DIRECTOR**

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	/	2	7	/	2	0	0	5

Transaction ID: SA11A1.4222

Amount of Each Receipt this Period

								250.00
--	--	--	--	--	--	--	--	--------

C. Full Name (Last, First, Middle Initial)
RONALD SCHRAGER

Mailing Address **1601 WASHINGTON AVE**

City **MIAMI** State **FL** Zip Code **33139**

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

Name of Employer **LNR Property Corporation** Occupation **Vice President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	5

Transaction ID: SA11A1.4216

Amount of Each Receipt this Period

								1000.00
--	--	--	--	--	--	--	--	---------

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 14	
	(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"/> 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)
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

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

Mailing Address **1601 WASHINGTON AVE**

City MIAMI	State FL	Zip Code 33139
----------------------	--------------------	--------------------------

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

Name of Employer LENNAR PARTNERS, INC.	Occupation DIVISION PRESIDENT
--------------------------------------------------	-----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	5

Transaction ID: SA11A1.4224

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	7500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 14

<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)
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

Full Name (Last, First, Middle Initial) A. Chase		Transaction ID: SB21B.4261 Date of Disbursement 09 / 02 / 2005	
Mailing Address P. O. Box 5206		Amount of Each Disbursement this Period 825.67	
City New Hyde Park	State NY	Zip Code 11042	Category/ Type
Purpose of Disbursement Merchant Banking Fees			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Chase		Transaction ID: SB21B.4262 Date of Disbursement 10 / 03 / 2005	
Mailing Address P. O. Box 5206		Amount of Each Disbursement this Period 22.14	
City New Hyde Park	State NY	Zip Code 11042	Category/ Type
Purpose of Disbursement Merchant Banking Fee			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Chase		Transaction ID: SB21B.4263 Date of Disbursement 11 / 02 / 2005	
Mailing Address P. O. Box 5206		Amount of Each Disbursement this Period 22.14	
City New Hyde Park	State NY	Zip Code 11042	Category/ Type
Purpose of Disbursement Merchant Banking Fees			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	869.95
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

Full Name (Last, First, Middle Initial) A. Chase		Transaction ID: SB21B.4264 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 5
Mailing Address P. O. Box 5206		Amount of Each Disbursement this Period 89.38
City New Hyde Park State NY Zip Code 11042	Purpose of Disbursement Merchant Banking Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Chase		Transaction ID: SB21B.4265 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address P. O. Box 5206		Amount of Each Disbursement this Period 22.14
City New Hyde Park State NY Zip Code 11042	Purpose of Disbursement Merchant Banking Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Chase		Transaction ID: SB21B.4266 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address P. O. Box 5206		Amount of Each Disbursement this Period 32.50
City New Hyde Park State NY Zip Code 11042	Purpose of Disbursement Merchant Banking Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional)	144.02
TOTAL This Period (last page this line number only)	1013.97

**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 12 / 14

<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)
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

Full Name (Last, First, Middle Initial)

A. BACK AMERICA'S CONSERVATIVES PAC (BAC PAC)

Mailing Address 1251 DARTMOUTH COURT

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.4234

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BARNEY FRANK FOR CONGRESS COMMITTEE

Mailing Address P O BOX 260

City NEWTONVILLE State MA Zip Code 02460

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: MA District: 04

Transaction ID: SB23.4237

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ROY BLUNT

Mailing Address PO Box 50100
PO Box 50100

City Springfield State MO Zip Code 65805

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: MO District: 7

Transaction ID: SB23.4232

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

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)

PAGE 13 / 14

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

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

NAME OF COMMITTEE (In Full)
COMMERCIAL MORTGAGE SECURITIES ASSOCIATION PAC

Full Name (Last, First, Middle Initial)

A. PEOPLE FOR ENTERPRISE, TRADE, AND ECONOMIC GROWTH (PETE PAC)

Mailing Address 7804 Evening Lane

City Alexandria State VA Zip Code 22306

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.4240

Date of Disbursement

10 / 12 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

4000.00

Form/Schedule: **F3XA**

Transaction ID:

This amended report responds to your letter dated September 27, 2006. In that letter you noted that Commercial Mortgage Securities Association ('CMSA') PAC failed to adequately identify the individuals who made contributions to CMSA PAC. The amended report corrects this insufficiency and provides the missing information. You also identified that the report failed to reflect the official name of the connected organization. The amended report now properly identifies the Commercial Mortgage Securities Association PAC. Finally, you noted in your letter that the report's beginning cash balance did not equal the ending cash balance of the 2005 Mid-Year Report. Due to administrative error, an amended 2005 Mid-Year Report was not uploaded properly. This resulted in the discrepancy in cash on hand for the 2005 Mid-Year and Year-End reports. That report has been uploaded. We apologize for this oversight.