

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 Senate Majority Fund

ADDRESS (number and street) P.O. Box 32025 Check if different than previously reported. (ACC) Phoenix AZ 85064

2. FEC IDENTIFICATION NUMBER C00368431 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 01 01 2007 through 06 30 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 Mrs. Ashley Ragan Signature of Treasurer Electronically Filed by Mrs. Ashley Ragan Date 07 12 2007

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
Senate Majority Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

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		26196.18
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	26196.18									
(c) Total Receipts (from Line 19)	139681.77	139681.77								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	165877.95	165877.95								
7. Total Disbursements (from Line 31)	152323.08	152323.08								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13554.87	13554.87								
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
Senate Majority Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

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	33100.00	33100.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	33100.00	33100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	106500.00	106500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	139600.00	139600.00
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.)	81.77	81.77
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))	139681.77	139681.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	139681.77	139681.77

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.....	32323.08	32323.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	32323.08	32323.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	120000.00	120000.00
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))..	152323.08	152323.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	152323.08	152323.08

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)	139600.00	139600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	139600.00	139600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	32323.08	32323.08
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32323.08	32323.08

**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 / 51
	<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Arne L. Christenson		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2007
Mailing Address 11817 Stuart Mill Road		Transaction ID: SA11A1.7334
City State Zip Code Oakton VA 22124	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer American Express Co.	Occupation Government Affairs	
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. Mr. Vernon A. Clark		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2007
Mailing Address P.O. Box 3385		Transaction ID: SA11A1.7336
City State Zip Code State Line NV 89449	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Clark & Associates	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms Jennifer M. Connelly		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2007
Mailing Address 308 Dawnwood Drive		Transaction ID: SA11A1.7338
City State Zip Code Edgewater MD 21307	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Cephalon, Inc.	Occupation Director, Policy Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	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 7 / 51
	<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)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial)
MajGen T.L. Corwin, USMC, Ret.

Mailing Address 36 Park Road

City State Zip Code
Stafford VA 20037

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

Name of Employer
Blank Rome Government Relation
Occupation
Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2007

Transaction ID: SA11A1.7232

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas M. Dyer

Mailing Address 600 New Hampshire Ave., NW

City State Zip Code
Washington DC 20037

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

Name of Employer
Blank Rome LLP
Occupation
Chairman, Washington

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2007

Transaction ID: SA11A1.7217

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Lawrence F. Flick, II

Mailing Address 1 Logan Square

City State Zip Code
Philadelphia PA 19103

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

Name of Employer
Blank Rome LLP
Occupation
Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2007

Transaction ID: SA11A1.7221

Amount of Each Receipt this Period
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 / 51
	<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Barry Genkin		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007
Mailing Address 544 Howe Road		Transaction ID: SA11A1.7222
City State Zip Code Merion Station PA 19066	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, LLP	Occupation Finance 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. Ms. Constance B. Girard-diCarlo		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007
Mailing Address 1155 23rd Street, NW, Apt. 6A		Transaction ID: SA11A1.7224
City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name (Last, First, Middle Initial) C. Mr. David F. Girard-diCarlo		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007
Mailing Address 1155 23rd Street, NW, Apt. 6A		Transaction ID: SA11A1.7226
City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, LLP	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional) ▶	5600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 51
	<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Anthony Haller		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2007	
Mailing Address 1137 Tower Ln E		Transaction ID: SA11A1.7260	
City State Zip Code Narberth PA 19072-1131	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Blank Rome, 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. Mr. John W. Howard		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2007	
Mailing Address 1317 F Street, N.W., #600		Transaction ID: SA11A1.7341	
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Wexler & Walker	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Mr. David M. Kuchinos		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007	
Mailing Address 178 Propert Drive		Transaction ID: SA11A1.7228	
City State Zip Code Huntingdon Valley PA 19006	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Blank Rome, LLP	Occupation Partner		
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 10 / 51
	<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Henry M. Kuller, Esq.		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2007
Mailing Address One Logan Square		Transaction ID: SA11A1.7262
City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, LLP	Occupation Attorney	
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. Mr. Edward Kutler		Date of Receipt M M / D D / Y Y Y Y 04 / 03 / 2007
Mailing Address 601 13th Street, NW, #410 South		Transaction ID: SA11A1.7279
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Clark & Weinstock	Occupation Managing Director	
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. Ms. Ann B. Laupheimer		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007
Mailing Address 234 Cuylers Lane		Transaction ID: SA11A1.7230
City State Zip Code Haverford PA 19041	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, LLP	Occupation Partner	
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) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 51
	<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Joseph W. Mahoney, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2007	
Mailing Address 733 Waverly Road		Transaction ID: SA11A1.7264	
City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Philadelphia Chbr. of Com.	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Diane M. Major		Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2007	
Mailing Address 2232 Westwood Place		Transaction ID: SA11A1.7280	
City State Zip Code Falls Church VA 22043	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Bockorny Group	Occupation Principal		
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. Mrs. Jane Garvey Mattoon		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2007	
Mailing Address 6344 Cavalier Corridor		Transaction ID: SA11A1.7343	
City State Zip Code Falls Church VA 22044	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Homemaker		
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 12 / 51
	<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Richard J. McMahon		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007
Mailing Address 441 Oak Lane		Transaction ID: SA11A1.7234
City State Zip Code Moylan PA 19065	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, 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. Mr. Seven M. Miller		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007
Mailing Address 211 Winding Way		Transaction ID: SA11A1.7236
City State Zip Code Merion PA 19066	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, 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. Mr. Robert J. Mittman		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007
Mailing Address 405 Lexington Ave., 23rd Floor		Transaction ID: SA11A1.7238
City State Zip Code New York NY 10174	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, LLP	Occupation Chairman - New York	
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 13 / 51
	<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)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial)
Mr. Jeff M. Myers

Mailing Address 1701 Pennsylvania Ave., #200

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation
Cephalon, Inc. Vice Pres., Government Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2007

Transaction ID: SA11A1.7345

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Timothy D. Pecsénye

Mailing Address 409 S. 18th Street

City State Zip Code
Philadelphia PA 19146

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

Name of Employer Occupation
Blank Rome, LLP Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 22 / 2007

Transaction ID: SA11A1.7240

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark I. Rabinowitz

Mailing Address 471 Ballytore Road

City State Zip Code
Wynnewood PA 19096

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

Name of Employer Occupation
Blank Rome, LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2007

Transaction ID: SA11A1.7268

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 51
	<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Louis M. Rappaport		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007
Mailing Address 333 Bala Avenue		Transaction ID: SA11A1.7242
City State Zip Code Bala Cynwyd PA 19004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, 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. Mr. Christopher Ray		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2007
Mailing Address 463 Schoolhouse Lane		Transaction ID: SA11A1.7244
City State Zip Code Devon PA 19333	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, 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. Mr. Morey S. Rosenbloom		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2007
Mailing Address 917 Exeter Crest		Transaction ID: SA11A1.7271
City State Zip Code Villanova PA 19085	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Blank Rome, LLP	Occupation Attorney	
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 15 / 51
	<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Philip B. Seaton		Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2007	
Mailing Address 210 Lake Drive, Ste. 200		Transaction ID: SA11A1.7272	
City State Zip Code Cherry Hill NJ 08002	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Blank Rome, LLP	Occupation Attorney		
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. Mr. Michael J. Semes		Date of Receipt M M / D D / Y Y Y Y Y 03 / 22 / 2007	
Mailing Address 5 Erika Lane		Transaction ID: SA11A1.7246	
City State Zip Code Broomall PA 19008	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Blank Rome, 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. Mrs. Karen K. Smith		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2007	
Mailing Address 5214 Farrington Rd.		Transaction ID: SA11A1.7347	
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Homemaker		
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 16 / 51
	<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Edward F. Spaniel, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 03 / 22 / 2007	
Mailing Address 1216 Addison Walkway		Transaction ID: SA11A1.7248	
City State Zip Code Philadelphia PA 19147		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Blank Rome, 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. Mr. Benjamin G. Stonelake, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2007	
Mailing Address 305 Meadowbrook Lane		Transaction ID: SA11A1.7274	
City State Zip Code Broomall PA 19008-1539		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Blank Rome, LLP		Occupation Attorney	
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. Mr. Glen R. Thomas		Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2007	
Mailing Address 1733 Weatherburn Drive		Transaction ID: SA11A1.7276	
City State Zip Code New Cumberland PA 17070		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Blank Rome Govt. Relations LLC		Occupation Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	33100.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 51
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 06 / 23 / 2007
Mailing Address 100 Abbott Park Rd. D312 AP6D		Transaction ID: SA11C.7400
City State Zip Code Abbott Park IL 60064	FEC ID number of contributing federal political committee. C C00040279	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. AMERICAN DENTAL POLITICAL ACTION CMTE.		Date of Receipt MM / DD / YYYY 05 / 11 / 2007
Mailing Address 1111 14th Street NW Suite 1100		Transaction ID: SA11C.7298
City State Zip Code Washington DC 20005	FEC ID number of contributing federal political committee. C C00000729	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS COMPANY POLITICAL ACTION COMMITTEE (AXPPAC)		Date of Receipt MM / DD / YYYY 05 / 11 / 2007
Mailing Address 801 Pennsylvania Ave. NW Suite 650		Transaction ID: SA11C.7299
City State Zip Code Washington DC 20004	FEC ID number of contributing federal political committee. C C00040535	Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	12000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial)
A. AMERICAN HOTEL AND LODGING ASSOCIATION PAC

Mailing Address 1201 New York Avenue NW
Sixth Floor

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7352

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
B. AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 520 N. NORTHWEST HIGHWAY

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7354

Amount of Each Receipt this Period
3000.00

Full Name (Last, First, Middle Initial)
C. AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 555 13th Street
Suite 600 West

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: SA11C.7293

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 51
(check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial)
A. ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC/PAC)

Mailing Address 1300 NORTH 17TH STREET 8TH FLOOR

City State Zip Code
ROSSLYN VA 22209

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
06 / 23 / 2007

Transaction ID: SA11C.7401

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street
Room 7-A-50

City State Zip Code
San Antonio TX 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2007

Transaction ID: SA11C.7296

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
C. AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Mailing Address 1625 Prince Street
Suite 225

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2007

Transaction ID: SA11C.7303

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	12000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 20 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial)
BALCH AND BINGHAM LLP FEDERAL POLITICAL COMMITTEE

Mailing Address 1275 PENNSYLVANIA AVE NW 10TH FLR

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00358440

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: SA11C.7215

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION STATE AND FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 600 Peachtree Street NE
3rd Floor

City State Zip Code
Atlanta GA 30308

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

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

Transaction ID: SA11C.7304

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
CALIFORNIA DAIRIES FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2198

City State Zip Code
LOS BANOS CA 93635

FEC ID number of contributing federal political committee. **C** C00349746

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 7

Transaction ID: SA11C.7402

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **9000.00**

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 21 / 51
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. CEPHALON INC. EMPLOYEES' POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2007	
Mailing Address 41 Moores Rd.		Transaction ID: SA11C.7306	
City State Zip Code Frazer PA 19355		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00378794			
Name of Employer Occupation			
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. COALPAC A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2007	
Mailing Address 101 Constitution Avenue NW Suite 500 East		Transaction ID: SA11C.7322	
City State Zip Code Washington DC 20001		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C C00109819			
Name of Employer Occupation			
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. COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 05 / 24 / 2007	
Mailing Address 1350 I Street NW Suite 590		Transaction ID: SA11C.7350	
City State Zip Code Washington DC 20005		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00274944			
Name of Employer Occupation			
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:	PAGE 22 / 51
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. COOPER INDUSTRIES POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address P.O. Box 4446		Transaction ID: SA11C.7356
City State Zip Code Houston TX 77210	FEC ID number of contributing federal political committee. C C00099937	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DELTA DENTAL PLANS ASSOCIATION PAC (DELTAPAC)		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 1515 W 22ND STREET SUITE 1200		Transaction ID: SA11C.7308
City State Zip Code OAK BROOK IL 60523	FEC ID number of contributing federal political committee. C C00213819	Amount of Each Receipt this Period 2500.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DIRECT VOICE THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 7
Mailing Address 1615 L STREET NW SUITE 1100		Transaction ID: SA11C.7404
City State Zip Code WASHINGTON DC 20036	FEC ID number of contributing federal political committee. C C00235309	Amount of Each Receipt this Period 1500.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	5000.00
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 23 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial)
EBAY INC-COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE

Mailing Address 228 S. Washington St.
Ste. 115

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. C C00342394

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7358

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Mailing Address LILLY CORPORATE CENTER

City State Zip Code
INDIANAPOLIS IN 46285

FEC ID number of contributing federal political committee. C C00082792

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7361

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1225 CONNECTICUT AVE NW SUITE 800

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. C C00227744

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7360

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional) 7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 51
(check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial)
FRAGOMEN POLITICAL ACTION COMMITTEE (FRAGOMEN PAC)

Mailing Address 1212 NEW YORK AVENUE NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00418095

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2007

Transaction ID: SA11C.7309

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN (GDVPCP)

Mailing Address 2941 Fairview Park Dr.
Suite 100

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2007

Transaction ID: SA11C.7311

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
GLAXOSMITHKLINE POLITICAL ACTION COMMITTEE

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2007

Transaction ID: SA11C.7295

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 51
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE (HIPAC)		Date of Receipt
Mailing Address 1001 Pennsylvania Avenue Suite 700		<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 0 5 / 1 1 / 2 0 0 7
City	State	Zip Code
Washington	DC	20004
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.7313
C C00096156		Amount of Each Receipt this Period
		<input type="text"/> 3000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 3000.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)		Date of Receipt
Mailing Address 412 First Street SE Suite 300		<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 0 6 / 2 3 / 2 0 0 7
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.7406
C C00022343		Amount of Each Receipt this Period
		<input type="text"/> 1000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 1000.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. KINDRED HEALTHCARE INC. POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 680 South Fourth Avenue ONE VENCOR PLACE		<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 0 5 / 1 1 / 2 0 0 7
City	State	Zip Code
Louisville	KY	40202
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.7314
C C00242271		Amount of Each Receipt this Period
		<input type="text"/> 1000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 1000.00	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 51
(check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial)
MEDTRONIC INC. MEDICAL TECHNOLOGY FUND

Mailing Address 1420 New York Avenue NW Suite 600

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00311878

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2007

Transaction ID: SA11C.7408

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36th Way
Box 97017

City State Zip Code
Redmond WA 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 08 / 2007

Transaction ID: SA11C.7294

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
MINEPAC A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION

Mailing Address 101 Constituion Ave NW
Suite 500 East

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00304634

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 11 / 2007

Transaction ID: SA11C.7324

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 6500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 51
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address P. O. Box 7135		Transaction ID: SA11C.7316
City Washington State DC Zip Code 20044	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C C00283135		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. NATIONAL ASSOCIATION OF PLUMBING-HEATING-COOLING CONTRACTORS PAC AKA PHCC-PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 180 S WASHINGTON P O BOX 6808		Transaction ID: SA11C.7318
City FALLS CHURCH State VA Zip Code 22046	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C C00157875		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS INC. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 1875 Eye Street NW Suite 600		Transaction ID: SA11C.7320
City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00303339		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

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

FOR LINE NUMBER: PAGE 28 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial)
NATIONAL RESTAURANT ASSOCIATION PAC

Mailing Address 1200 17th Street NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. C C00003764

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7363

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ROOFING CONTRACTORS ASSOCIATION (ROOFPAC)

Mailing Address 324 FOURTH STREET NE

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. C C00244863

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 7

Transaction ID: SA11C.7278

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
ORACLE CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1015 15th Street Northwest Suite 200

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. C C00323048

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7365

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) 4000.00

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 29 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial)
PINNACLE WEST CAPITAL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 400 N 5TH STREET STATION 9996
MS 9973

City State Zip Code
PHOENIX AZ 85004

FEC ID number of contributing federal political committee. **C** C00015933

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11C.7327

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
QWEST COMMUNICATIONS INTERNATIONAL INC POLITICAL ACTION COMMITTEE

Mailing Address 1020 19th St. NW
Suite 700

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00237156

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

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

Transaction ID: SA11C.7328

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 141 Spring Street

City State Zip Code
Lexington MA 02421

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7367

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional) ► **10500.00**

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

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

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

FOR LINE NUMBER: PAGE 30 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial)
A. SENIORS HOUSING POLITICAL ACTION COMMITTEE

Mailing Address 5100 WISCONSIN AVENUE NW #307

City State Zip Code
WASHINGTON DC 20016

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

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

Transaction ID: SA11C.7301

Amount of Each Receipt this Period
3000.00

Full Name (Last, First, Middle Initial)
B. TRAVELERS PROPERTY CASUALTY CORP. POLITICAL ACTION COMMITTEE (TAP PAC)

Mailing Address One Tower Square

City State Zip Code
Hartford CT 06183

FEC ID number of contributing federal political committee. **C** C00376376

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

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

Transaction ID: SA11C.7332

Amount of Each Receipt this Period
3000.00

Full Name (Last, First, Middle Initial)
C. UNION PACIFIC CORP FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13th St. NW Suite 340

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

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

Transaction ID: SA11C.7349

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional) ► **9000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 51
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial)
US ONCOLOGY INC GOOD GOVERNMENT COMMITTEE

Mailing Address 16825 NORTHCHASE DRIVE SUITE 1300

City State Zip Code
HOUSTON TX 77060

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7368

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
WAL-MART STORES INC PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8TH STREET

City State Zip Code
BENTONVILLE AR 72716

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11C.7370

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	106500.00

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 32 / 51

<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Clarence A. DeLong		Transaction ID: SB21B.7200 Date of Disbursement 01 / 31 / 2007	
Mailing Address 3811 E. Solano Drive		Amount of Each Disbursement this Period 559.14	
City Paradise Valley State AZ Zip Code 85253	Purpose of Disbursement Wages Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Clarence A. DeLong		Transaction ID: SB21B.7208 Date of Disbursement 02 / 28 / 2007	
Mailing Address 3811 E. Solano Drive		Amount of Each Disbursement this Period 210.09	
City Paradise Valley State AZ Zip Code 85253	Purpose of Disbursement Wages Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Clarence A. DeLong		Transaction ID: SB21B.7257 Date of Disbursement 03 / 29 / 2007	
Mailing Address 3811 E. Solano Drive		Amount of Each Disbursement this Period 316.71	
City Paradise Valley State AZ Zip Code 85253	Purpose of Disbursement Wages Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1085.94
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mr. Clarence A. DeLong		Transaction ID: SB21B.7290 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 3811 E. Solano Drive		Amount of Each Disbursement this Period 179.34	
City Paradise Valley State AZ Zip Code 85253	Purpose of Disbursement Wages		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Clarence A. DeLong		Transaction ID: SB21B.7374 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 3811 E. Solano Drive		Amount of Each Disbursement this Period 98.54	
City Paradise Valley State AZ Zip Code 85253	Purpose of Disbursement Wages		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JON KYL FOR U S SENATE		Transaction ID: SB21B.7201 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 579.84	
City PHOENIX State AZ Zip Code 85064	Purpose of Disbursement Rent		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	857.72
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 34 / 51

<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. JON KYL FOR U S SENATE		Transaction ID: SB21B.7202 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 55.00
City PHOENIX State AZ Zip Code 85064	Category/ Type	
Purpose of Disbursement Equipment Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JON KYL FOR U S SENATE		Transaction ID: SB21B.7203 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 138.00
City PHOENIX State AZ Zip Code 85064	Category/ Type	
Purpose of Disbursement Telephone and Internet		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JON KYL FOR U S SENATE		Transaction ID: SB21B.7205 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 579.84
City PHOENIX State AZ Zip Code 85064	Category/ Type	
Purpose of Disbursement Rent		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	772.84
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. JON KYL FOR U S SENATE		Transaction ID: SB21B.7206 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 138.00
City PHOENIX State AZ Zip Code 85064	Category/ Type	
Purpose of Disbursement Telephone & Internet		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JON KYL FOR U S SENATE		Transaction ID: SB21B.7207 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 55.00
City PHOENIX State AZ Zip Code 85064	Category/ Type	
Purpose of Disbursement Equipment Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JON KYL FOR U S SENATE		Transaction ID: SB21B.7254 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 579.84
City PHOENIX State AZ Zip Code 85064	Category/ Type	
Purpose of Disbursement Rent		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	772.84
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. JON KYL FOR U S SENATE		Transaction ID: SB21B.7255 Date of Disbursement
Mailing Address POST OFFICE BOX 10246		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
City PHOENIX	State AZ	Zip Code 85064
Purpose of Disbursement Telephone & Internet	<input type="text" value="138.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 00		

Full Name (Last, First, Middle Initial) B. JON KYL FOR U S SENATE		Transaction ID: SB21B.7256 Date of Disbursement
Mailing Address POST OFFICE BOX 10246		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
City PHOENIX	State AZ	Zip Code 85064
Purpose of Disbursement Equipment Rental	<input type="text" value="55.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 00		

Full Name (Last, First, Middle Initial) C. JON KYL FOR U S SENATE		Transaction ID: SB21B.7285 Date of Disbursement
Mailing Address POST OFFICE BOX 10246		<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
City PHOENIX	State AZ	Zip Code 85064
Purpose of Disbursement Rent	<input type="text" value="579.84"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 00		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="772.84"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. JON KYL FOR U S SENATE		Transaction ID: SB21B.7286 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 138.00
City PHOENIX State AZ Zip Code 85064	Category/ Type	
Purpose of Disbursement Telephone and Internet Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JON KYL FOR U S SENATE		Transaction ID: SB21B.7287 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 55.00
City PHOENIX State AZ Zip Code 85064	Category/ Type	
Purpose of Disbursement Equipment Rental Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JON KYL FOR U S SENATE		Transaction ID: SB21B.7375 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 579.84
City PHOENIX State AZ Zip Code 85064	Category/ Type	
Purpose of Disbursement Rent Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	772.84
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. JON KYL FOR U S SENATE		Transaction ID: SB21B.7376 Date of Disbursement 05 / 25 / 2007
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 55.00
City PHOENIX State AZ Zip Code 85064	Purpose of Disbursement Equipment Rental	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JON KYL FOR U S SENATE		Transaction ID: SB21B.7377 Date of Disbursement 05 / 25 / 2007
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 138.00
City PHOENIX State AZ Zip Code 85064	Purpose of Disbursement Telephone & Internet	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JON KYL FOR U S SENATE		Transaction ID: SB21B.7414 Date of Disbursement 06 / 29 / 2007
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 579.84
City PHOENIX State AZ Zip Code 85064	Purpose of Disbursement Rent	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	772.84
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. JON KYL FOR U S SENATE		Transaction ID: SB21B.7415 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 55.00
City PHOENIX State AZ Zip Code 85064	Purpose of Disbursement Equipment Rental	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JON KYL FOR U S SENATE		Transaction ID: SB21B.7416 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address POST OFFICE BOX 10246		Amount of Each Disbursement this Period 138.00
City PHOENIX State AZ Zip Code 85064	Purpose of Disbursement Telephone & Internet	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mrs. Ashley Ragan		Transaction ID: SB21B.7258 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 7
Mailing Address 307 East Royal Palm		Amount of Each Disbursement this Period 322.46
City Phoenix State AZ Zip Code 85020	Purpose of Disbursement Wages	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	515.46
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Mrs. Ashley Ragan		Transaction ID: SB21B.7289 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 307 East Royal Palm		Amount of Each Disbursement this Period 155.45	
City Phoenix State AZ Zip Code 85020	Purpose of Disbursement Wages	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Ashley Ragan		Transaction ID: SB21B.7373 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 307 East Royal Palm		Amount of Each Disbursement this Period 249.34	
City Phoenix State AZ Zip Code 85020	Purpose of Disbursement Wages	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Steven H. Gordon & Associates		Transaction ID: SB21B.7209 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7	
Mailing Address 507 Capitol Court NE #100		Amount of Each Disbursement this Period 4945.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement Fundraising Commission & Draw	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	5349.79
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Steven H. Gordon & Associates		Transaction ID: SB21B.7282 Date of Disbursement 04 / 11 / 2007
Mailing Address 507 Capitol Court NE #100		Amount of Each Disbursement this Period 1359.49
City Washington State DC Zip Code 20002	Purpose of Disbursement Reimb. for travel, printing, telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Steven H. Gordon & Associates		Transaction ID: SB21B.7291 Date of Disbursement 04 / 27 / 2007
Mailing Address 507 Capitol Court NE #100		Amount of Each Disbursement this Period 3433.55
City Washington State DC Zip Code 20002	Purpose of Disbursement Reimb. for Travel, Printing, Bkfst. Mtg. 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. Steven H. Gordon & Associates		Transaction ID: SB21B.7372 Date of Disbursement 05 / 22 / 2007
Mailing Address 507 Capitol Court NE #100		Amount of Each Disbursement this Period 10009.58
City Washington State DC Zip Code 20002	Purpose of Disbursement Reimb. for Dinner Event, Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	14802.62
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

A. Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates		Transaction ID: SB21B.7410 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 507 Capitol Court NE #100		Amount of Each Disbursement this Period 4000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Draw on Future Fundraising Commissions		
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) ▼	

B. Full Name (Last, First, Middle Initial) Steven H. Gordon & Associates		Transaction ID: SB21B.7413 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 507 Capitol Court NE #100		Amount of Each Disbursement this Period 458.58
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Reimb. for Telephone, Mailing, postage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) TARS Scholarship Fund		Transaction ID: SB21B.7412 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address P.O. Box 30653		Amount of Each Disbursement this Period 500.00
City Phoenix State AZ Zip Code 85046	Category/ Type	
Purpose of Disbursement Donation		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4958.58
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. United States Treasury		Transaction ID: SB21B.7196 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 7922		Amount of Each Disbursement this Period 349.54
City San Francisco State CA Zip Code 94120-7922	Category/ Type	
Purpose of Disbursement Payroll Taxes Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. United States Treasury		Transaction ID: SB21B.7198 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 7922		Amount of Each Disbursement this Period 50.49
City San Francisco State CA Zip Code 94120-7922	Category/ Type	
Purpose of Disbursement Payroll Taxes Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. United States Treasury		Transaction ID: SB21B.7283 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address P.O. Box 7922		Amount of Each Disbursement this Period 295.18
City San Francisco State CA Zip Code 94120-7922	Category/ Type	
Purpose of Disbursement Payroll Taxes Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	695.21
TOTAL This Period (last page this line number only) ▶	32129.52

**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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. CHAMBLISS FOR SENATE		Transaction ID: SB23.7214 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address P.O. BOX 4084		Amount of Each Disbursement this Period 5000.00
City MACON State GA Zip Code 31208	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name SAXBY CHAMBLISS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CHAMBLISS FOR SENATE		Transaction ID: SB23.7419 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address P.O. BOX 4084		Amount of Each Disbursement this Period 5000.00
City MACON State GA Zip Code 31208	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name SAXBY CHAMBLISS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. COLLINS FOR SENATOR		Transaction ID: SB23.7213 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address PO BOX 1096		Amount of Each Disbursement this Period 5000.00
City BANGOR State ME Zip Code 04402	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name SUSAN M COLLINS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. COLLINS FOR SENATOR		Transaction ID: SB23.7378 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 7
Mailing Address PO BOX 1096		Amount of Each Disbursement this Period 5000.00
City BANGOR State ME Zip Code 04402	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name SUSAN M COLLINS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. DOLE FOR SENATE COMMITTEE, INC		Transaction ID: SB23.7252 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7
Mailing Address 601 PA AVE NW 10TH FL N TOWER		Amount of Each Disbursement this Period 5000.00
City WASHINGTON State DC Zip Code 20004	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name ELIZABETH DOLE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. DOLE FOR SENATE COMMITTEE, INC		Transaction ID: SB23.7253 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7
Mailing Address 601 PA AVE NW 10TH FL N TOWER		Amount of Each Disbursement this Period 5000.00
City WASHINGTON State DC Zip Code 20004	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name ELIZABETH DOLE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. ENZI FOR US SENATE		Transaction ID: SB23.7388 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address PO BOX 2775		Amount of Each Disbursement this Period 5000.00
City CODY State WY Zip Code 82414	Purpose of Disbursement Contribution Category/ Type	
Candidate Name MICHAEL B ENZI		
Office Sought: <input type="checkbox"/> House <input checked="" 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: WY District: 00		

Full Name (Last, First, Middle Initial) B. FRIENDS OF JIM INHOFE COMMITTEE		Transaction ID: SB23.7422 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address PO BOX 13300		Amount of Each Disbursement this Period 5000.00
City OKLAHOMA CITY State OK Zip Code 73113	Purpose of Disbursement Contribution Category/ Type	
Candidate Name JAMES M INHOFE		
Office Sought: <input type="checkbox"/> House <input checked="" 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: OK District: 00		

Full Name (Last, First, Middle Initial) C. FRIENDS OF JIM INHOFE COMMITTEE		Transaction ID: SB23.7423 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address PO BOX 13300		Amount of Each Disbursement this Period 5000.00
City OKLAHOMA CITY State OK Zip Code 73113	Purpose of Disbursement Contribution Category/ Type	
Candidate Name JAMES M INHOFE		
Office Sought: <input type="checkbox"/> House <input checked="" 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: OK District: 00		

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. Friends of John Barrasso		Transaction ID: SB23.7431 Date of Disbursement 06 / 29 / 2007	
Mailing Address 6896 Casper Mountain Road		Amount of Each Disbursement this Period 5000.00	
City Casper State WY Zip Code 82601	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name John Barrasso			
Office Sought: <input type="checkbox"/> House <input checked="" 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: WY District:			

Full Name (Last, First, Middle Initial) B. Friends of John Barrasso		Transaction ID: SB23.7432 Date of Disbursement 06 / 29 / 2007	
Mailing Address 6896 Casper Mountain Road		Amount of Each Disbursement this Period 5000.00	
City Casper State WY Zip Code 82601	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name John Barrasso			
Office Sought: <input type="checkbox"/> House <input checked="" 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: WY District:			

Full Name (Last, First, Middle Initial) C. FRIENDS OF SESSIONS SENATE COMMITTEE INC		Transaction ID: SB23.7397 Date of Disbursement 05 / 22 / 2007	
Mailing Address P O BOX 4278		Amount of Each Disbursement this Period 5000.00	
City MONTGOMERY State AL Zip Code 36103	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name JEFF SESSIONS			
Office Sought: <input type="checkbox"/> House <input checked="" 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: AL District: 00			

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. FRIENDS OF SESSIONS SENATE COMMITTEE INC		Transaction ID: SB23.7398 Date of Disbursement
Mailing Address P O BOX 4278		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="22"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="07"/> <input type="text" value="07"/>
City MONTGOMERY	State AL	Zip Code 36103
Purpose of Disbursement Contribution	<input type="text" value=""/>	
Candidate Name JEFF SESSIONS	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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: AL District: 00		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) B. GORDON SMITH FOR U S SENATE COMMITTEE INC (96)		Transaction ID: SB23.7384 Date of Disbursement
Mailing Address 228 S WASHINGTON STREET SUITE 115		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="22"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="07"/> <input type="text" value="07"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Contribution	<input type="text" value=""/>	
Candidate Name GORDON HAROLD SMITH	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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: OR District: 00		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) C. JOHN MCCAIN 2008, INC		Transaction ID: SB23.7212 Date of Disbursement
Mailing Address PO BOX 16118		<input type="text" value="03"/> <input type="text" value="03"/> / <input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="07"/> <input type="text" value="07"/>
City ARLINGTON	State VA	Zip Code 22215
Purpose of Disbursement Contribution	<input type="text" value=""/>	
Candidate Name JOHN S MCCAIN	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 00		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="15000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

**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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. LINDSEY GRAHAM FOR SENATE		Transaction ID: SB23.7399 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address PO BOX 1155		Amount of Each Disbursement this Period 5000.00
City SENECA State SC Zip Code 29679	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name LINDSEY OLIN GRAHAM		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LINDSEY GRAHAM FOR SENATE		Transaction ID: SB23.7421 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address PO BOX 1155		Amount of Each Disbursement this Period 5000.00
City SENECA State SC Zip Code 29679	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name LINDSEY OLIN GRAHAM		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. NORM COLEMAN FOR U.S. SENATE		Transaction ID: SB23.7379 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 1410 ENERGY PARK DRIVE, #11		Amount of Each Disbursement this Period 5000.00
City ST. PAUL State MN Zip Code 55108	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name NORM COLEMAN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

Use separate schedule(s)
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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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. NORM COLEMAN FOR U.S. SENATE		Transaction ID: SB23.7380 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 1410 ENERGY PARK DRIVE, #11		Amount of Each Disbursement this Period 5000.00
City ST. PAUL State MN Zip Code 55108	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name NORM COLEMAN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PAT ROBERTS FOR SENATE		Transaction ID: SB23.7393 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address PO BOX 433		Amount of Each Disbursement this Period 5000.00
City GREAT BEND State KS Zip Code 67530	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name PAT ROBERTS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PAT ROBERTS FOR SENATE		Transaction ID: SB23.7394 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address PO BOX 433		Amount of Each Disbursement this Period 5000.00
City GREAT BEND State KS Zip Code 67530	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name PAT ROBERTS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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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)
Senate Majority Fund

Full Name (Last, First, Middle Initial) A. PEOPLE FOR PETE DOMENICI		Transaction ID: SB23.7386 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address POST OFFICE BOX 93656		Amount of Each Disbursement this Period 5000.00
City ALBUQUERQUE State NM Zip Code 87199	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name PETE V DOMENICI		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PEOPLE FOR PETE DOMENICI		Transaction ID: SB23.7387 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address POST OFFICE BOX 93656		Amount of Each Disbursement this Period 5000.00
City ALBUQUERQUE State NM Zip Code 87199	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name PETE V DOMENICI		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. TEAM SUNUNU		Transaction ID: SB23.7385 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address PO BOX 500		Amount of Each Disbursement this Period 5000.00
City RYE State NH Zip Code 03870	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name JOHN E SUNUNU		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	120000.00