

# 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  
Federal Express Political Action Committee

ADDRESS (number and street) 942 South Shady Grove Road  
 Check if different than previously reported. (ACC)  
Memphis TN 38120-4117

2. **FEC IDENTIFICATION NUMBER** C00068692  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 01 01 2006 through 01 31 2006

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

Type or Print Name of Treasurer Robert T. Molinet

Signature of Treasurer Electronically Filed by Robert T. Molinet Date 02 10 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Federal Express Political Action Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		529775.05
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	529775.05									
(c) Total Receipts (from Line 19) .....	136856.21	136856.21								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	666631.26	666631.26								
7. Total Disbursements (from Line 31) .....	55500.00	55500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	611131.26	611131.26								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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  
Federal Express Political Action Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4081.98	4081.98
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	125654.80	125654.80
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	129736.78	129736.78
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	129736.78	129736.78
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 .....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2119.43	2119.43
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)) .....	136856.21	136856.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	136856.21	136856.21

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	50500.00	50500.00
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))..	55500.00	55500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	55500.00	55500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	129736.78	129736.78
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	129736.78	129736.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 / 19
	<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)  
Federal Express Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
DOROTHY E BERRY

Mailing Address 9320 GWYNN HOLLOW COVE

City State Zip Code  
GERMANTOWN TN 38139

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

Name of Employer Federal Express Occupation VP IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR1192374013453

Amount of Each Receipt this Period  
300.00

P/R Deduction (\$150.00 Se-mi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL L DUCKER

Mailing Address 942 SOUTH SHADY GROVE ROAD

City State Zip Code  
MEMPHIS TN 38120

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

Name of Employer Federal Express Occupation EVP INTERNATIONAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR1192315013453

Amount of Each Receipt this Period  
250.00

P/R Deduction (\$125.00 Se-mi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
DAVID J BRONCZEK

Mailing Address 942 SOUTH SHADY GROVE ROAD

City State Zip Code  
MEMPHIS TN 38120

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

Name of Employer Federal Express Occupation PRESIDENT / CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.66

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR1192324113453

Amount of Each Receipt this Period  
416.66

P/R Deduction (\$208.33 Se-mi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>966.66</b>
<b>TOTAL</b> 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 / 19
	<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)  
Federal Express Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. ALAN B GRAF, JR</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 942 SOUTH SHADY GROVE ROAD		<b>Transaction ID: PR1192406613453</b>
City MEMPHIS	State TN	Zip Code 38120
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Federal Express	Occupation EVP Chief Financial Officer	P/R Deduction (\$150.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. G. E CLARK</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 942 SOUTH SHADY GROVE ROAD		<b>Transaction ID: PR1192487213453</b>
City MEMPHIS	State TN	Zip Code 38120
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 416.66
Name of Employer Federal Express	Occupation FTN CEO & PRESIDENT	P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.66	

Full Name (Last, First, Middle Initial) <b>C. ROBERT B CARTER</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 942 SOUTH SHADY GROVE ROAD		<b>Transaction ID: PR1192874213453</b>
City MEMPHIS	State TN	Zip Code 38120
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Federal Express	Occupation EVP Chief Info Officer	P/R Deduction (\$125.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>966.66</b>
<b>TOTAL</b> 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 / 19
	<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)  
Federal Express Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. DENISE M YUNKUN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1801 ELK RIVER COVE		<b>Transaction ID: PR1193066913453</b>	
City State Zip Code COLLIERVILLE TN 38017	Amount of Each Receipt this Period _____ 384.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Express	Occupation DIRECTOR SALES PLANNING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 384.00		
		P/R Deduction (\$192.00 Se-mi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. Richard A. Faieta</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address P.O. Box 35667		<b>Transaction ID: PR1195226613453</b>	
City State Zip Code Greensboro NC 27425-5667	Amount of Each Receipt this Period _____ 210.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Caribbean Transportation Services	Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$210.00 Monthly)	

Full Name (Last, First, Middle Initial) <b>C. Dan J. Sullivan</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1000 FedEx Drive		<b>Transaction ID: PR1195619013453</b>	
City State Zip Code Moon Township PA 15108-9373	Amount of Each Receipt this Period _____ 416.66		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fedex Ground	Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 416.66		
		P/R Deduction (\$416.66 Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>1010.66</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 19
	<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)  
Federal Express Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. JOHN L MERINO</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 942 SOUTH SHADY GROVE ROAD		<b>Transaction ID: PR1195622713453</b>
City MEMPHIS	State TN	Zip Code 38120
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Federal Express	Occupation CVP Principal Account Officer	P/R Deduction (\$125.00 Se-mi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. FREDERICK W SMITH</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 942 SOUTH SHADY GROVE ROAD		<b>Transaction ID: PR1195638813453</b>
City MEMPHIS	State TN	Zip Code 38120
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 588.00
Name of Employer Federal Express	Occupation CHAIRMAN OF THE BOARD	P/R Deduction (\$294.00 Se-mi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00	

Full Name (Last, First, Middle Initial) <b>C. DOUGLAS G DUNCAN</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 942 SOUTH SHADY GROVE ROAD		<b>Transaction ID: PR1642730913453</b>
City MEMPHIS	State TN	Zip Code 38120
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Federal Express	Occupation PRESIDENT / CEO	P/R Deduction (\$150.00 Se-mi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1138.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4081.98</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 19
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input checked="" 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)  
Federal Express Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Nebraska Leadership Political Action Committee

Mailing Address P.O. Box 3325

City State Zip Code  
Omaha NE 68103

FEC ID number of contributing federal political committee. **C** C00366419

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	3	/	2	0	0	6

Transaction ID: 23491359

Amount of Each Receipt this Period  
5000.00

Refund

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 19	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Federal Express Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
1st Tennessee Bank

Mailing Address 165 Madison Avenue  
9th Floor

City State Zip Code  
Memphis TN 38103-2723

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2119.43

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 3 1 / 2 0 0 6

Transaction ID: 23491093

Amount of Each Receipt this Period  
2119.43

Bank interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2119.43
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2119.43

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 19

<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)  
Federal Express Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. National Association of Business PAC</b>		Transaction ID: 23410557
Mailing Address 1828 L Street Suite 400		Date of Disbursement MM / DD / YYYY 01 / 20 / 2006
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00

# 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 13 / 19

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Federal Express Political Action Committee

**A.** Friends of Senator Mike Williams

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 176

**Transaction ID:** 23332488

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	0	6

City State Zip Code  
Maynardville TN 37807

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Mike Williams, STATE SENATE TN

011  
Category/  
Type

Candidate Name  
Mike Williams

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Mike Williams, STATE SENATE TN

State: TN District: 4

**B.** Ophelia Ford Campaign

Full Name (Last, First, Middle Initial)

Mailing Address 54 North Arcadian Circle  
Suite 102

**Transaction ID:** 23346198

Date of Disbursement

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

City State Zip Code  
Memphis TN 38103

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Debt Retirement

011  
Category/  
Type

Candidate Name  
Ophelia Ford

Office Sought:  House  
 Senate  
 President

Disbursement For: 2005  
 Primary  General  
 Other (specify) ▼  
Special-General

Debt Retirement

State: TN District: 29

**C.** Kathryn Bowers for Senate

Full Name (Last, First, Middle Initial)

Mailing Address 1458 Timothy

**Transaction ID:** 23346193

Date of Disbursement

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

City State Zip Code  
Memphis TN 38116

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Kathryn Bowers, STATE SENATE TN

011  
Category/  
Type

Candidate Name  
TN Sen. Kathryn Bowers

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Kathryn Bowers, STATE SENATE TN

State: TN District: 33

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00
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**TOTAL** This Period (last page this line number only) .....

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# 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 14 / 19

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Federal Express Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Citizens for District Attorney Bill Gibbons</b>		Transaction ID: 23367552 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address P.O. Box 3288		Amount of Each Disbursement this Period 1000.00
City Memphis State TN Zip Code 38173	011 Category/ Type	
Purpose of Disbursement Bill Gibbons, DIST. ATTORNEY GENL TN		Bill Gibbons, DIST. ATTORNEY GENL TN
Candidate Name Bill Gibbons		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Citizens for District Attorney Bill Gibbons</b>		Transaction ID: 23371673 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 3288		Amount of Each Disbursement this Period 2000.00
City Memphis State TN Zip Code 38173	011 Category/ Type	
Purpose of Disbursement Bill Gibbons, DIST. ATTORNEY GENL TN		Bill Gibbons, DIST. ATTORNEY GENL TN
Candidate Name Bill Gibbons		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Shelby County Republican Party</b>		Transaction ID: 23410556 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 4515 Poplar Avenue Suite 520		Amount of Each Disbursement this Period 1000.00
City Memphis State TN Zip Code 38117	011 Category/ Type	
Purpose of Disbursement Contribution		Contribution
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> 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 15 / 19

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Federal Express Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Maine Senate Democratic Campaign Committee</b>		<b>Transaction ID:</b> 23410578 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 22 Smith Street		Amount of Each Disbursement this Period 1000.00
City Augusta State ME Zip Code 04330	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 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>B. Democratic Governor's Association</b>		<b>Transaction ID:</b> 23410568 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 499 South Capital Street, SW Suite 422		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 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>C. Democratic Governor's Association</b>		<b>Transaction ID:</b> 23410569 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 499 South Capital Street, SW Suite 422		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Federal Express Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Democratic Governor's Association</b>		<b>Transaction ID:</b> 23410570 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 499 South Capital Street, SW Suite 422		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 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>B. Democratic Governor's Association</b>		<b>Transaction ID:</b> 23410571 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 499 South Capital Street, SW Suite 422		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 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>C. Republican Governor's Association ok</b>		<b>Transaction ID:</b> 23410558 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 555 11th Street NW Suite 700		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20004	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 19

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Federal Express Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Republican Governor's Association ok</b>		<b>Transaction ID:</b> 23410562 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 555 11th Street NW Suite 700		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20004	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 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>B. Republican Governor's Association ok</b>		<b>Transaction ID:</b> 23410566 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 555 11th Street NW Suite 700		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20004	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 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>C. Republican Governor's Association ok</b>		<b>Transaction ID:</b> 23410567 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 555 11th Street NW Suite 700		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20004	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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 18 / 19

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Federal Express Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Friends of Rosalind Kurita</b>		Transaction ID: 23491623 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 211 Deerwood Road		Amount of Each Disbursement this Period -500.00	
City Clarksville	State TN	Zip Code 37043	Category/ Type 011
Purpose of Disbursement Void - contribution dated 8/26/2005			
Candidate Name Rosalind Kurita		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: TN District: 33		
		Void - contribution dated 8/26/2005	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	50500.00

Image# 26990319551

Form/Schedule: **F3XN**

Transaction ID:

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