



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
National Leadership PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

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		231605.25
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	94648.00									
(c) Total Receipts (from Line 19) .....	164673.06	892146.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	259321.06	1123751.41								
7. Total Disbursements (from Line 31) .....	132080.07	996510.42								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	127240.99	127240.99								
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  
National Leadership PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

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	103210.00	597182.00
(i) Itemized (use Schedule A) .....	12868.70	40457.97
(ii) Unitemized .....	116078.70	637639.97
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	94.36	106.19
(b) Political Party Committees .....	48500.00	248400.00
(c) Other Political Committees (such as PACs) .....	164673.06	886146.16
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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	5000.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	164673.06	892146.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	164673.06	892146.16

**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.....	33780.07	335725.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	33780.07	335725.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	86000.00	613000.00
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	2500.00
(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	2500.00
29. Other Disbursements.....	12300.00	45285.00
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))..	132080.07	996510.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	132080.07	996510.42

**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) .....	164673.06	886146.16
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	164673.06	883646.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	33780.07	335725.42
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	5000.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	33780.07	330725.42

**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 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Joanne Jackie Adams		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 820 Riverside Drive Apt. 5A		<b>Transaction ID:</b> C98311
City New York	State NY	Zip Code 10032
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2006 <input checked="" 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.</b> Dr. Victor G. Alicea, PhD		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 315 Riverside Dr		<b>Transaction ID:</b> C97928
City New York	State NY	Zip Code 10025-4112
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Boriuca College	Occupation President	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> James Alston		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 800 Riverside Drive Apt. 5A		<b>Transaction ID:</b> C97961
City New York	State NY	Zip Code 10032
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer McCall Bronxwood	Occupation Attorney	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<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 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Delores Ashford

Mailing Address 304 West 102nd Street  
#2B

City State Zip Code  
New York NY 10025

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

Name of Employer Occupation  
Delores Music Management Management of Musicians

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

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

**Transaction ID:** C98085

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Don H. Barden

Mailing Address 163 Madison Avenue

City State Zip Code  
Detroit MI 48226

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

Name of Employer Occupation  
Barden Companies, Inc. President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID:** C98102

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Michael Barkin

Mailing Address 419 West Merrick Road

City State Zip Code  
Valley Stream NY 11580

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

Name of Employer Occupation  
Self-Employed Podiatrist

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

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

**Transaction ID:** C98233

Amount of Each Receipt this Period  
280.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5480.00</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 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Arthur H. Barnes

Mailing Address 7 W 34th St  
Fl 9

City State Zip Code  
New York NY 10001-8100

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

Name of Employer Occupation  
HIP Health Plans Senior VP

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID:** C98191

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Kara Bennett

Mailing Address 3112 Golf Course Road W

City State Zip Code  
Owings Mills MD 21117

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID:** C98272

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Stephen M. Bennett

Mailing Address 3789 Woodside Rd

City State Zip Code  
Woodside CA 94062-3646

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

Name of Employer Occupation  
Intuit Chairperson

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 6

**Transaction ID:** C97927

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7000.00
<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 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
W. Bradley Bennett

Mailing Address 3112 Golf Course Road W

City Owings Mills State MD Zip Code 21117

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID: C98271**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Page M. Morton Black

Mailing Address Premium Point

City New Rochelle State NY Zip Code 10801

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

Name of Employer Information Requested Occupation Information Requested  
Premium Point Chairperson

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

**Transaction ID: C98059**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Bertrand J. Brown

Mailing Address 8200B Bulls Ferry Rd # 6

City North Bergen State NJ Zip Code 07047-7010

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

**Transaction ID: C98316**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<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:	PAGE 10 / 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Robert F. Carroll		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 37 Reynolds Road		<b>Transaction ID:</b> C98122
City State Zip Code Glen Cove NY 11542	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kenneth J. Chenault		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 200 Vesey Street		<b>Transaction ID:</b> C98008
City State Zip Code New York NY 10285	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer American Express	Occupation Chairman, CEO	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Byung Chang Cho		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1080 Edgewood Lane		<b>Transaction ID:</b> C97951
City State Zip Code Fort Lee NJ 07024	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Custom Jewelry Wholesaler	Occupation Jeweler	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1800.00
<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 11 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Of Oklahoma Choctaw Nation

Mailing Address P.O. Drawer 1210

City State Zip Code  
Durant OK 74702

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

Name of Employer Occupation  
Native American Tribe Native American Tribe

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 03 / 2006

Transaction ID: C98275

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ki Sook Choe

Mailing Address 109 East 116th Street

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Self-Employed Laundromat Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 27 / 2006

Transaction ID: C97950

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Young Tai Choi

Mailing Address 502 Glen Avenue

City State Zip Code  
Palisades Park NJ 07650

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

Name of Employer Occupation  
Self CPA

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 27 / 2006

Transaction ID: C97949

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<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 12 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Robert Cole</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6	
Mailing Address 4000 Chancery Ct NW		<b>Transaction ID: C98174</b>	
City Washington	State DC	Zip Code 20007-2140	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Alston & Bird	Occupation Attorney		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Lorraine R. Colville</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 132 Thompson St Apt 4		<b>Transaction ID: C98298</b>	
City New York	State NY	Zip Code 10012-5316	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Debra Cooper</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 290 W End Ave # 9A		<b>Transaction ID: C98003</b>	
City New York	State NY	Zip Code 10023-8106	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Coldwell Bank Hurt Kenedy	Occupation Real Estate		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2050.00
<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 13 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Dr. Jay C Cowan, MD</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 470 Lenox Avenue Suite 1-E		<b>Transaction ID: C98320</b>	
City State Zip Code New York NY 10037-3003	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jay Cowan MD LLC	Occupation Executive		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Lewis B. Cullman</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6	
Mailing Address 767 3rd Ave 36th Floor		<b>Transaction ID: C97924</b>	
City State Zip Code New York NY 10017-2023	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth B. Davis, MD</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6	
Mailing Address 353 E 17th St Apt 24B		<b>Transaction ID: C98176</b>	
City State Zip Code New York NY 10003-3840	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer retired	Occupation retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<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 14 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Eugene Denegall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 40 W 135th Street Apt. 10T		<b>Transaction ID:</b> C97977
City State Zip Code New York NY 10037	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Judith A. A. Engel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 6
Mailing Address 300 Albany St Apt 5J		<b>Transaction ID:</b> C98144
City State Zip Code New York NY 10280-1406	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Judith Engel And Partners	Occupation President	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> J. Norman Estes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 11142 Telmar Dr		<b>Transaction ID:</b> C97998
City State Zip Code Northport AL 35475-2830	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NHS Management LLC	Occupation President	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2550.00
<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 15 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Dr. Walter Faggett, MD

Mailing Address 4013 16th St., NW #234

City Washington State DC Zip Code 20011

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

Name of Employer DC Dept of Health Occupation Medical Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 2 7 / 2 0 0 6

**Transaction ID: C98372**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Jeffrey J. Falcone

Mailing Address 572 Park Avenue

City New York State NY Zip Code 10021

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

Name of Employer Physician Occupation Self

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

**Transaction ID: C98226**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Jeanne Donovan Fisher

Mailing Address 262 Central Park West

City New York State NY Zip Code 10024

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

**Transaction ID: C98308**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<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 16 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Eugene Giscombe</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 8 Beaver Dam Rd		<b>Transaction ID: C98322</b>
City Pomona State NY Zip Code 10970-3204	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Giscombe Henderson Inc. Occupation real estate executive		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Susie Gonzalez</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address PO Box 4119		<b>Transaction ID: C98172</b>
City Miami State FL Zip Code 33014	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Suzie Gonzalez Inc. Occupation C.E.O.		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) <b>C. Stanley J. Grant</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 81 Country Village		<b>Transaction ID: C98121</b>
City Manhasset Hills State NY Zip Code 11040	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Friends of the Congressional Glauc Occupation President		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8000.00
<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 17 / 69
	<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)  
National Leadership PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Jeff L Greenup, ESQ. Mailing Address 205 W 137th St City New York State NY Zip Code 10030-2406 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6 <b>Transaction ID: C98321</b> Amount of Each Receipt this Period 500.00
Name of Employer Self Occupation Attorney Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) E. Ronald Guy Mailing Address 243 W. 137th Street City New York State NY Zip Code 10030 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6 <b>Transaction ID: C98319</b> Amount of Each Receipt this Period 500.00
Name of Employer E. Ronald Guy & Associates Occupation President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Eric Hadar Mailing Address 770 Lexington Avenue City New York State NY Zip Code 10021 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6 <b>Transaction ID: C98006</b> Amount of Each Receipt this Period 2500.00
Name of Employer Allied Partners Occupation Real Estate Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</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 18 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> David Haidak		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
Mailing Address 11030 Dobbins Dr		<b>Transaction ID:</b> C98152	
City State Zip Code Potomac MD 20854-1824	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self employed	Occupation PHYSICIAN		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Hon. James A. Hayes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address P.O. Box 1014		<b>Transaction ID:</b> C98027	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Adams & Reese, LLP	Occupation Special Counsel		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Stephen B. Hill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 3320 Paul Paths Road		<b>Transaction ID:</b> C98029	
City State Zip Code La Grange NC 28551	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hill Co.	Occupation Executive		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4250.00
<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 19 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
William T. Hurley, III

Mailing Address

City State Zip Code

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

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

**Transaction ID:** C98318

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Reginald W. Idlett

Mailing Address 485 Amboy St

City State Zip Code  
Brooklyn NY 11212-4942

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

Name of Employer Information Requested Occupation Information Requested  
Kobrand Wine and Spirits Manager

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

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

**Transaction ID:** C98313

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Charles K. Izzo

Mailing Address 31-48 Maple Island Road

City State Zip Code  
Dowagiac MI 49047

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

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

**Transaction ID:** C97999

Amount of Each Receipt this Period  
350.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<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 20 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Timothy S. Jameison

Mailing Address 80 Gibson Blvd  
Apt 1B

City State Zip Code  
Valley Stream NY 11581-2046

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

Name of Employer NYC Department of Education  
Occupation public high school teacher

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2006

**Transaction ID:** C98096

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Corrine Jennings

Mailing Address 214 E 2nd St

City State Zip Code  
New York NY 10009-8031

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

Name of Employer Kenkeleba house  
Occupation Gallery Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
10 / 27 / 2006

**Transaction ID:** C97980

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Clarence E. Jones, Jr.

Mailing Address 556A Mac Donough Street

City State Zip Code  
Brooklyn NY 11233-1512

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

Name of Employer PainWebber, Inc.  
Occupation IT Manager

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2006

**Transaction ID:** C98062

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>650.00</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 21 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Eun Sank Kim</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6
Mailing Address		Transaction ID: C98387
City State Zip Code		Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. Jung Hyung Kim</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address Two Aldgate Drive West		Transaction ID: C98355
City State Zip Code Manhasset NY 11030		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Peter Koo</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 32 Angler Lane		Transaction ID: C97946
City State Zip Code Port Washington NY 11050		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Starside Drugs	Occupation Pharmacist	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4500.00
<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 22 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Woo Chon Kwak</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 4122 40th Street 3 FL		<b>Transaction ID: C98356</b> Amount of Each Receipt this Period 1000.00
City State Zip Code Sunnyside NY 11104		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Dong Boo Fashion	Occupation Owner	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Marsha Zlatin Laufer</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 178 Old Field Rd		<b>Transaction ID: C98005</b> Amount of Each Receipt this Period 2500.00
City State Zip Code Setauket NY 11733-1636		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation Speech therapist	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Marsha Zlatin Laufer</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 178 Old Field Rd		<b>Transaction ID: C98086</b> Amount of Each Receipt this Period 2500.00
City State Zip Code Setauket NY 11733-1636		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation Speech therapist	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<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 23 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Se Mok Lee</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address		<b>Transaction ID: C98357</b>	
City State Zip Code		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Information Requested Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Patricia Lidbury</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 68 Watergate Drive		<b>Transaction ID: C98001</b>	
City State Zip Code South Barrington IL 60010		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Homemaker Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Dennis Mehiel</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 115 E Stevens Avenue Suite 110		<b>Transaction ID: C98092</b>	
City State Zip Code New York NY 10595-1272		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Four M Investments Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Chairman Aggregate Year-to-Date ▼ 3500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2350.00
<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 24 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Dora Mendel</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 201 Ceder Avenue		<b>Transaction ID: C98028</b>	
City State Zip Code Hewlett NY 11557	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Bert Mitchell</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 32 Timber Ridge Dr		<b>Transaction ID: C98119</b>	
City State Zip Code Oyster Bay NY 11771-4204	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mitchell & Titus Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CEO Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Raymond J. Mollica</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 8223 14th Avenue		<b>Transaction ID: C98222</b>	
City State Zip Code Brooklyn NY 11228	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Podiatrist Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6250.00
<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 25 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Edward Myers, Esq., Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 2307 Adam Clayton Powell Jr Blvd		<b>Transaction ID: C98364</b>	
City State Zip Code New York NY 10030-2603	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Myers, Smith & Granady	Occupation President/CEO		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Richard Park</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 26 Park Place		<b>Transaction ID: C98359</b>	
City State Zip Code Roslyn Heights NY 11577	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Doctor		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C. Sung R. Park</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 6 Howell Road		<b>Transaction ID: C97947</b>	
City State Zip Code New City NY 10956	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3500.00
<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 26 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Susan Patricof		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 830 Park Ave		<b>Transaction ID:</b> C98363	
City State Zip Code New York NY 10021-2757	Amount of Each Receipt this Period 2200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer APEX Partners	Occupation Philanthropy		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Hon. Peter A. Peyser		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address West Sunnyside Lane		<b>Transaction ID:</b> C98205	
City State Zip Code Irvington NY 10533	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer GAMCO	Occupation Marketing		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Neil L. Pruitt, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 2323 Shenandoah Avenue		<b>Transaction ID:</b> C98274	
City State Zip Code Atlanta GA 30305	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer UHS Pruitt	Occupation Attorney		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5200.00
<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: <span style="float: right;">PAGE 27 / 69</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Asriel Rackow</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 936 5th Ave		<b>Transaction ID: C97978</b>	
City State Zip Code New York NY 10021-2653	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. David A. Rahm</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6	
Mailing Address 1125 Park Ave		<b>Transaction ID: C98173</b>	
City State Zip Code New York NY 10128-1243	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) <b>C. David A. Rahm</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 1125 Park Ave		<b>Transaction ID: C98300</b>	
City State Zip Code New York NY 10128-1243	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>2250.00</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 28 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Young Gil Rhee</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 142-03 29th Road		<b>Transaction ID: C98358</b>	
City State Zip Code Flushing NY 11354	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Silas Rhodes</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 209 East 23rd Street		<b>Transaction ID: C97958</b>	
City State Zip Code New York NY 10010	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer School of Visual Arts Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chairman of the Board Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>C. Delores Richards</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 2153 Adam Clayton Powell Jr Blvd #7A		<b>Transaction ID: C98323</b>	
City State Zip Code New York NY 10027	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer self Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation real estate broker Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<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 29 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Voza Rivers

Mailing Address 253 West 138th Street

City State Zip Code  
New York NY 10030

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

Name of Employer Harlem Arts Alliance Occupation Chairman

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: C98314

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
William A. Rogers

Mailing Address 150 West 58th Street Suite 5405

City State Zip Code  
New York NY 10019

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: C98315

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Lawrence Santi

Mailing Address 240 e. 5th Street

City State Zip Code  
Brooklyn NY 11218

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

Name of Employer Self-Employed Occupation Podiatrist

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: C98242

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<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 30 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> John Sasso		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 350 North Street		<b>Transaction ID:</b> C98360
City Boston	State MA	Zip Code 02113
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Advanced Strategies	Occupation Business Consultant	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Floyd A. Schlossberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 4200 W Peterson		<b>Transaction ID:</b> C98000
City Chicago	State IL	Zip Code 60646
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Alden Management	Occupation Executive	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Sarah Schoenkopf Kovner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 27 W 67th St		<b>Transaction ID:</b> C98004
City New York	State NY	Zip Code 10023-6258
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2300.00
<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 31 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Dr. Andrew Shapiro

Mailing Address 419 West Merrick Road

City State Zip Code  
Valley Stream NY 11580

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

Name of Employer Self-Employed Occupation  
Podiatrist

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

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

**Transaction ID:** C98232

Amount of Each Receipt this Period  
280.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph J. Simmons, IV

Mailing Address 3399 Forecastle Court

City State Zip Code  
Woodbridge VA 22192

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

Name of Employer Booz Allen Hamilton Occupation  
Senior Associate

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

**Transaction ID:** C98091

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Alan B. Slifka

Mailing Address 911 Park Ave

City State Zip Code  
New York NY 10021-0337

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

Name of Employer Halcyon Mgmt Co. LLC Occupation  
Principal

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 6

**Transaction ID:** C97849

Amount of Each Receipt this Period  
750.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1330.00</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 32 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Lynn Stern		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 101 Central Park W		Transaction ID: C98007
City State Zip Code New York NY 10023-4204	Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self employed	Occupation Photographer	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Terence P. Stewart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 2100 M St NW Ste 200		Transaction ID: C97982
City State Zip Code Washington DC 20037-1218	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self-employed	Occupation Attorney	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Gary F. Stones		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 134 Hayes Street		Transaction ID: C98227
City State Zip Code Garden City NY 11530	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self-Employed	Occupation Podiatrist	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<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 33 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Pyong Hwa Suh</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6	
Mailing Address 200 Old Palisade Road Apt. 200		<b>Transaction ID: C98388</b>	
City State Zip Code Fort Lee NJ 07024	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Information Requested Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. David S. Taub</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6	
Mailing Address 48 Harbor Park Dr		<b>Transaction ID: C98175</b>	
City State Zip Code Pr Wshngtn NY 11050-4653	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Information Requested Executive Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Willard B. Taylor</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 125 Broad St Fl 29		<b>Transaction ID: C98211</b>	
City State Zip Code New York NY 10004-2400	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Information Requested Attorney Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1750.00
<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:	PAGE 34 / 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Leadership PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Otis Thornton Mailing Address 1120 Route 18 City East Brunswick State NJ Zip Code 08816 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6 <b>Transaction ID: C98325</b> Amount of Each Receipt this Period 1000.00
Name of Employer Auto Dealer Occupation Owner Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ivanka Trump Mailing Address 725 5th Avenue City New York State NY Zip Code 10019 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6 <b>Transaction ID: C98118</b> Amount of Each Receipt this Period 1000.00
Name of Employer The Trump Corporation Occupation VP Development & Acquisitions Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Sharon K. Tucker Mailing Address 2114 Chesapeake Harbour Dr E Apt 201 City Annapolis State MD Zip Code 21403-5607 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6 <b>Transaction ID: C98076</b> Amount of Each Receipt this Period 500.00
Name of Employer Tucker Associates Occupation Attorney Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<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 35 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Jeanette S. Wagner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 1035 5th Ave		<b>Transaction ID:</b> C98167
City State Zip Code New York NY 10028-0135	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Lloyd Williams		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 200 W 136th St		<b>Transaction ID:</b> C98317
City State Zip Code New York NY 10030-2697	Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Greater Harlem Chamber Of Commerce Occupation President		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Karen Williams-Hastie		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 1001 Pennsylvania Ave NW Ste 1100		<b>Transaction ID:</b> C98109
City State Zip Code Washington DC 20004-2595	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Crowell & Moring Occupation Partner		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3250.00
<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 36 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mark A. Willis		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 5 E 22nd Street Apt. 30P		Transaction ID: C98312
City State Zip Code New York NY 10010	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Chase Manhattan Bank	Occupation Executive	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Janet S. Wolfe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 51 W 86th St # 802		Transaction ID: C97976
City State Zip Code New York NY 10024-3613	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Friends of the Symphony	Occupation Executive Director	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mortimer Zuckerman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 599 Lexington Ave		Transaction ID: C97993
City State Zip Code New York NY 10022-6030	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Boston Properties	Occupation Executive	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	103210.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 / 69
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" 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)  
National Leadership PAC

A. Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE - CONTRIBUTIONS

Mailing Address 430 South Capitol Street SE  
2nd Floor

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00347864

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
106.19

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

Transaction ID: C98367

Amount of Each Receipt this Period  
94.36

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	94.36
<b>TOTAL</b> This Period (last page this line number only) .....	▶	94.36

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 69
	(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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. ADVANCED MEDICAL TECHNOLOGY ASSOCIATION POLOTICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1200 G St. NW Ste. 400		<b>Transaction ID: C98301</b>
City State Zip Code Washington DC 20005	FEC ID number of contributing federal political committee. <b>C</b> C00340356	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. ADVANCED MEDICAL TECHNOLOGY ASSOCIATION POLOTICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1200 G St. NW Ste. 400		<b>Transaction ID: C98302</b>
City State Zip Code Washington DC 20005	FEC ID number of contributing federal political committee. <b>C</b> C00340356	Amount of Each Receipt this Period 2000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. ADVOCAT INC. POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1621 Galleria Blvd		<b>Transaction ID: C97997</b>
City State Zip Code Brentwood TN 37027	FEC ID number of contributing federal political committee. <b>C</b> C00421735	Amount of Each Receipt this Period 2000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<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 39 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS COMPANY POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 801 Pennsylvania Ave. NW Suite 650		<b>Transaction ID: C97925</b>
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00040535		
Name of Employer Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. American Hospital Assoc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 325 7TH ST, NW Attn: M. Mark Seklecki		<b>Transaction ID: C98031</b>
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00106146		
Name of Employer Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. American Hospital Assoc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 325 7TH ST, NW Attn: M. Mark Seklecki		<b>Transaction ID: C98060</b>
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00106146		
Name of Employer Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8000.00</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: PAGE 40 / 69  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
National Leadership PAC

Full Name (Last, First, Middle Initial)  
**A. AMERICAN STAFFING ASSOCIATION STAFFINGPAC**

Mailing Address 277 S WASHINGTON ST STE 200

City State Zip Code  
**ALEXANDRIA VA 22314**

FEC ID number of contributing federal political committee. **C C00145623**

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**11 / 01 / 2006**

**Transaction ID: C98053**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. BUCHANAN INGERSOLL PROFESSIONAL CORPORATION COMMIT**

Mailing Address ONE OXFORD CENTRE  
301 GRANT STREET 20TH FLOOR

City State Zip Code  
**PITTSBURGH PA 15219**

FEC ID number of contributing federal political committee. **C C00195388**

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 19 / 2006**

**Transaction ID: C97847**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. DIRECT SUPPLY INC PARTNERS PAC DSI PARTNERS PAC**

Mailing Address 6767 North Industrial Road

City State Zip Code  
**Milwaukee WI 53223**

FEC ID number of contributing federal political committee. **C C00409516**

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 27 / 2006**

**Transaction ID: C97994**

Amount of Each Receipt this Period  
2500.00

**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: (check only one)	PAGE 41 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A.</b> ESOP AssociationPAC		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1726 M Street, NW, Suite 501		Transaction ID: C98297
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00196089		
Name of Employer Occupation		
Receipt For: 2006 <input checked="" 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>B.</b> Genesis Health Ventures, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 101 East State St.		Transaction ID: C98002
City State Zip Code Kennett Square PA 19348	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00292094		
Name of Employer Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> GlaxoSmithKline PAC		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address Five Moore Dr.		Transaction ID: C98304
City State Zip Code Durham NC 27709	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00199703		
Name of Employer Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	11000.00
<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 42 / 69
	<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)  
National Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
KINDRED HEALTHCARE INC. POLITICAL ACTION COMMITTEE

Mailing Address 680 South Fourth Avenue  
ONE VENCOR PLACE

City State Zip Code  
Louisville KY 40202

FEC ID number of contributing federal political committee. **C** C00242271

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

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

**Transaction ID:** C98030

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Manor Healthcare Corp Fed PAC

Mailing Address 11555 Darnestown Road

City State Zip Code  
Gaithersburg MD 20878

FEC ID number of contributing federal political committee. **C** C00260141

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID:** C98273

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
MEDICAL FACILITIES OF AMERICA INC PAC

Mailing Address 2917 PENN FOREST BOULEVARD STE 200  
PO BOX 29600

City State Zip Code  
ROANOKE VA 24018

FEC ID number of contributing federal political committee. **C** C00405472

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 6

**Transaction ID:** C97996

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>9500.00</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 43 / 69
	<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. PGA Tour Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6	
Mailing Address 112 TPC Blvd., Sawgrass		<b>Transaction ID: C97926</b>	
City State Zip Code Ponte Vedra Beach FL 32082	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00196428</b>			
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. SAFECO-PAC</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address SAFECO PLAZA		<b>Transaction ID: C98303</b>	
City State Zip Code SEATTLE WA 98185	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00034876</b>			
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. SOLAR ENERGY INDUSTRIES ASSOCIATION PAC</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 805 15TH STREET NW SUITE 510		<b>Transaction ID: C98299</b>	
City State Zip Code WASHINGTON DC 20005	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C C00421982</b>			
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<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:	PAGE 44 / 69
	(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)  
National Leadership PAC

A. Full Name (Last, First, Middle Initial)  
SUN HEALTHCARE GROUP INC POLITICAL ACTION COMMITTEE/AKA SUN HEALTHCARE PAC

Mailing Address 101 Sun Avenue NE

City State Zip Code  
Albuquerque NM 87109

FEC ID number of contributing federal political committee. **C** C00398826

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

Transaction ID: C97995

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	48500.00

**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)

<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Century Direct</b>		<b>Transaction ID:</b> D12376 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 3000 47th Ave		Amount of Each Disbursement this Period 2400.00
City Long Island City      State NY      Zip Code 11101-3415		
Purpose of Disbursement Printing (non-candidate)	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Century Direct</b>		<b>Transaction ID:</b> D12375 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 3000 47th Ave		Amount of Each Disbursement this Period 5418.75
City Long Island City      State NY      Zip Code 11101-3415		
Purpose of Disbursement Printing (non-candidate)	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Completecampaigns.com</b>		<b>Transaction ID:</b> D12361 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 4676 Kensington Dr		Amount of Each Disbursement this Period 437.50
City San Diego      State CA      Zip Code 92116-3823		
Purpose of Disbursement Internet service	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8256.25
<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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Completecampaigns.com</b>		<b>Transaction ID: D12362</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 4676 Kensington Dr		Amount of Each Disbursement this Period 125.00
City San Diego State CA Zip Code 92116-3823	Purpose of Disbursement Internet service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Completecampaigns.com</b>		<b>Transaction ID: D12363</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 4676 Kensington Dr		Amount of Each Disbursement this Period 100.00
City San Diego State CA Zip Code 92116-3823	Purpose of Disbursement Internet service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. Con Edison</b>		<b>Transaction ID: D12381</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address PO Box 138		Amount of Each Disbursement this Period 70.09
City New York State NY Zip Code 10276-0138	Purpose of Disbursement Utilities Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	295.09
<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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. George Dalley</b>		<b>Transaction ID: D12392</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1706 Crestwood Drive, NW		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20001	Purpose of Disbursement Travel expense reimbursement Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE - CONTRIBUTIONS</b>		<b>Transaction ID: D12366</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 430 South Capitol Street SE 2nd Floor		Amount of Each Disbursement this Period 94.36
City Washington State DC Zip Code 20003	Purpose of Disbursement PAC fundraising services Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* in-kind received

Full Name (Last, First, Middle Initial) <b>C. ExxonMobile</b>		<b>Transaction ID: D12384</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address P.O. Box 530962		Amount of Each Disbursement this Period 281.63
City Atlanta State GA Zip Code 30353-0962	Purpose of Disbursement Automobile Expenses Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	475.99
<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)

<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Fedex</b>		Transaction ID: D12385 Date of Disbursement 10 / 27 / 2006	
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 220.93	
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Messenger-FedEx Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Fedex</b>		Transaction ID: D12386 Date of Disbursement 11 / 17 / 2006	
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 63.82	
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Messenger-FedEx Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Health Plan of New York</b>		Transaction ID: D12393 Date of Disbursement 10 / 27 / 2006	
Mailing Address Box 9221 G. P. O.		Amount of Each Disbursement this Period 350.00	
City New York State NY Zip Code 10087-9221	Purpose of Disbursement Health Insurance Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	634.75
<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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Korea Central Daily News</b>		<b>Transaction ID: D12396</b> Date of Disbursement 11 / 17 / 2006
Mailing Address 43-27 36th Street		Amount of Each Disbursement this Period 600.00
City Long Island City	State NY Zip Code 11101	
Purpose of Disbursement Print Ads (non-candidate)		004 Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Korea Times</b>		<b>Transaction ID: D12397</b> Date of Disbursement 11 / 17 / 2006
Mailing Address 42-22 27 Street		Amount of Each Disbursement this Period 700.00
City Long Island City	State NY Zip Code 11101	
Purpose of Disbursement Print Ads (non-candidate)		004 Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Alexander Leopold</b>		<b>Transaction ID: D12370</b> Date of Disbursement 11 / 03 / 2006
Mailing Address 245 East 58th Street Apt. 14E		Amount of Each Disbursement this Period 400.00
City New York	State NY Zip Code 10022	
Purpose of Disbursement Salary		001 Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1700.00
<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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Pitney Bowes Inc.</b>		<b>Transaction ID: D12411</b> Date of Disbursement 11 / 17 / 2006	
Mailing Address PO Box 85390		Amount of Each Disbursement this Period 278.52	
City Louisville State KY Zip Code 40285-5390	Purpose of Disbursement Postage (non-candidate) Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Postmaster, NYC</b>		<b>Transaction ID: D12413</b> Date of Disbursement 11 / 17 / 2006	
Mailing Address Manhattanville Station P.O. Box 5577		Amount of Each Disbursement this Period 390.00	
City New York State NY Zip Code 10027	Purpose of Disbursement Postage (non-candidate) Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Postmaster, NYC</b>		<b>Transaction ID: D12412</b> Date of Disbursement 11 / 17 / 2006	
Mailing Address Manhattanville Station P.O. Box 5577		Amount of Each Disbursement this Period 105.00	
City New York State NY Zip Code 10027	Purpose of Disbursement Postage (non-candidate) Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	773.52
<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)

<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Charles Rangel</b>		<b>Transaction ID: D12377</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address PO Box 5577 Manhattanville Station		Amount of Each Disbursement this Period 40.00
City New York State NY Zip Code 10027-5570		
Purpose of Disbursement Travel expense reimbursement	Candidate Name	002 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Charles Rangel</b>		<b>Transaction ID: D12378</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address PO Box 5577 Manhattanville Station		Amount of Each Disbursement this Period 114.23
City New York State NY Zip Code 10027-5570		
Purpose of Disbursement Travel expense reimbursement	Candidate Name	002 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Darren Rigger</b>		<b>Transaction ID: D12383</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 8117 Dumont Dr Apt 301		Amount of Each Disbursement this Period 5000.00
City Vienna State VA Zip Code 22180-7207		
Purpose of Disbursement Salary	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5154.23
<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 52 / 69

<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Segye Times</b>		Transaction ID: D12416 Date of Disbursement 11 / 17 / 2006	
Mailing Address 38-42 9th Street		Amount of Each Disbursement this Period 300.00	
City Long Island City State NY Zip Code 11101	Purpose of Disbursement Print Ads (non-candidate)	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Siloam Printing Corp.</b>		Transaction ID: D12417 Date of Disbursement 11 / 17 / 2006	
Mailing Address 160-13 Northern Blvd.		Amount of Each Disbursement this Period 1000.00	
City Flushing State NY Zip Code 11358	Purpose of Disbursement Printing (non-candidate)	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. State Hospitality, Inc.</b>		Transaction ID: D12418 Date of Disbursement 11 / 03 / 2006	
Mailing Address 2565 Broadway Suite 304		Amount of Each Disbursement this Period 2010.00	
City New York State NY Zip Code 10025	Purpose of Disbursement Fundraising consultant	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3310.00
<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)

<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. State Hospitality, Inc.</b>		<b>Transaction ID: D12419</b> Date of Disbursement 11 / 08 / 2006
Mailing Address 2565 Broadway Suite 304		Amount of Each Disbursement this Period 2010.00
City New York State NY Zip Code 10025	Purpose of Disbursement Fundraising consultant Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) <b>B. Thunderball Courier Systems</b>		<b>Transaction ID: D12420</b> Date of Disbursement 11 / 17 / 2006
Mailing Address 1133 Broadway Ste 223		Amount of Each Disbursement this Period 136.00
City New York State NY Zip Code 10010-8196	Purpose of Disbursement Messenger-FedEx Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. Time Warner Cable 16M</b>		<b>Transaction ID: D12421</b> Date of Disbursement 11 / 03 / 2006
Mailing Address P.O. Box 9227		Amount of Each Disbursement this Period 176.84
City Uniondale State NY Zip Code 11555-9227	Purpose of Disbursement TV-Cable Buy Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 004

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2322.84</b>
<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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		<b>Transaction ID: D12424</b> Date of Disbursement 11 / 17 / 2006
Mailing Address P.O. Box 489		Amount of Each Disbursement this Period 202.30
City Newark State NJ Zip Code 07101-0489	Purpose of Disbursement Mobile Phone Candidate Name 001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID: D12422</b> Date of Disbursement 10 / 27 / 2006
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 394.18
City Albany State NY Zip Code 12212-5154	Purpose of Disbursement Phones Candidate Name 001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		<b>Transaction ID: D12423</b> Date of Disbursement 11 / 17 / 2006
Mailing Address PO Box 1100		Amount of Each Disbursement this Period 180.97
City Albany State NY Zip Code 12250-0001	Purpose of Disbursement Phones Candidate Name 001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	777.45
<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 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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. MBNA America</b>		Transaction ID: D12400 Date of Disbursement 11 / 03 / 2006
Mailing Address PO Box 15019		Amount of Each Disbursement this Period 10000.00
City Wilmington	State DE Zip Code 19886-5019	
Purpose of Disbursement Credit card payment - various		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bellagio Hotel</b>		Transaction ID: D12512 Date of Disbursement 11 / 03 / 2006
Mailing Address 3600 Las Vegas Boulevard South		Amount of Each Disbursement this Period 191.84
City Las Vegas	State NV Zip Code 89109	
Purpose of Disbursement Travel		002 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Bellagio Hotel</b>		Transaction ID: D12508 Date of Disbursement 11 / 03 / 2006
Mailing Address 3600 Las Vegas Boulevard South		Amount of Each Disbursement this Period 191.84
City Las Vegas	State NV Zip Code 89109	
Purpose of Disbursement Travel		002 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

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

10000.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Bistro Bis</b>		Transaction ID: D12499 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 15 E Street Northwest		Amount of Each Disbursement this Period 1095.00
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Catering expense (non-candidate)		
Candidate Name		003 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bistro Bis</b>		Transaction ID: D12507 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 15 E Street Northwest		Amount of Each Disbursement this Period 731.00
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Catering expense (non-candidate)		
Candidate Name		003 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Golden Carriage</b>		Transaction ID: D12516 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address PO Box 38		Amount of Each Disbursement this Period 742.00
City Rye State NY Zip Code 10580-0038	[MEMO ITEM]	
Purpose of Disbursement Travel		
Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Golden Carriage</b>		<b>Transaction ID:</b> D12521 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address PO Box 38		Amount of Each Disbursement this Period 619.00
City Rye State NY Zip Code 10580-0038	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. GotCompany, Inc.</b>		<b>Transaction ID:</b> D12513 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1260 University Street 5th Floor		Amount of Each Disbursement this Period 250.00
City Montreal State QC Zip Code H3B-3-9	[MEMO ITEM]	
Purpose of Disbursement Internet Service Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Jaguar Travel Corp.</b>		<b>Transaction ID:</b> D12510 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 430 S Capitol St SE c/o J. Vaughn		Amount of Each Disbursement this Period 20.00
City Washington State DC Zip Code 20003-4024	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Jaguar Travel Corp.</b>		<b>Transaction ID: D12502</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 430 S Capitol St SE c/o J. Vaughn		Amount of Each Disbursement this Period 47.00
City Washington State DC Zip Code 20003-4024	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Jaguar Travel Corp.</b>		<b>Transaction ID: D12501</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 430 S Capitol St SE c/o J. Vaughn		Amount of Each Disbursement this Period 47.00
City Washington State DC Zip Code 20003-4024	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Jaguar Travel Corp.</b>		<b>Transaction ID: D12511</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 430 S Capitol St SE c/o J. Vaughn		Amount of Each Disbursement this Period 20.00
City Washington State DC Zip Code 20003-4024	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Loews Regency Hotel</b>		Transaction ID: D12522 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 540 Park Avenue		Amount of Each Disbursement this Period 1654.42
City New York State NY Zip Code 10021	[MEMO ITEM]	
Purpose of Disbursement Catering expense Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mobay Uptown</b>		Transaction ID: D12497 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 17 West 129th Street		Amount of Each Disbursement this Period 204.89
City New York State NY Zip Code 10027	[MEMO ITEM]	
Purpose of Disbursement Meetings/meals Candidate Name		003 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. National Press Club</b>		Transaction ID: D12505 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 529 14th Street Northwest		Amount of Each Disbursement this Period 219.16
City Washington State DC Zip Code 20045	[MEMO ITEM]	
Purpose of Disbursement Meetings/meals Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		<b>Transaction ID:</b> D12509 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address PO Box 28983		Amount of Each Disbursement this Period 327.80
City Edgewood State MD Zip Code 21040	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. United Air</b>		<b>Transaction ID:</b> D12503 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 200 Terminal Drive		Amount of Each Disbursement this Period 459.30
City Fort Lauderdale State FL Zip Code 33315	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. US Airways</b>		<b>Transaction ID:</b> D12504 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 111 West Rio Salado Parkway		Amount of Each Disbursement this Period 1474.80
City Tempe State AZ Zip Code 85281	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	33700.12

**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)  
National Leadership PAC

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

Mailing Address PO BOX 3002

City CHARLESTON State WV Zip Code 25331

Purpose of Disbursement  
Contribution

Candidate Name  
Mike Callaghan

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: WV District: 02

Transaction ID: D12401

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

5000.00

011  
Category/  
Type

B. Full Name (Last, First, Middle Initial)  
Connecticut Democratic State Central Committee

Mailing Address Attn: PAC Director  
179 Allyn Street

City Hartford State CT Zip Code 06103

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D12382

Date of Disbursement

11 / 03 / 2006

Amount of Each Disbursement this Period

5000.00

011  
Category/  
Type

C. Full Name (Last, First, Middle Initial)  
Democratic Executive Committee of Florida

Mailing Address 214 South Bronough Street

City Tallahassee State FL Zip Code 32302

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D12388

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

5000.00

011  
Category/  
Type

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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Florida 13 Recount Fund</b>		<b>Transaction ID: D12387</b> Date of Disbursement 11 / 21 / 2006
Mailing Address 430 SOUTH CAPITOL STREET SE 2ND FL		Amount of Each Disbursement this Period 10000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRANCINE BUSBY FOR CONGRESS</b>		<b>Transaction ID: D12389</b> Date of Disbursement 11 / 01 / 2006
Mailing Address 783 CALLE DE SOTO		Amount of Each Disbursement this Period 5000.00
City SAN MARCOS State CA Zip Code 92078	Purpose of Disbursement Contribution Candidate Name Francine Busby Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. GRANT FOR CONGRESS</b>		<b>Transaction ID: D12398</b> Date of Disbursement 11 / 01 / 2006
Mailing Address P O BOX 489		Amount of Each Disbursement this Period 5000.00
City FRUITLAND State ID Zip Code 83619	Purpose of Disbursement Contribution Candidate Name Larry Grant Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	20000.00
<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)

<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. JACK DAVIS FOR CONGRESS</b>		Transaction ID: D12394 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address POST OFFICE BOX 2004		Amount of Each Disbursement this Period 5000.00
City AKRON State NY Zip Code 14001	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name John Davis, Jr		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JAY FAWCETT FOR CONGRESS 2006</b>		Transaction ID: D12395 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address PO Box 7124		Amount of Each Disbursement this Period 5000.00
City Colorado Springs State CO Zip Code 80933	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Jay Fawcett		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NANCY BOYDA FOR CONGRESS</b>		Transaction ID: D12403 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 510 SW 10TH STREET		Amount of Each Disbursement this Period 5000.00
City TOPEKA State KS Zip Code 66612	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Nancy Boyda		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" 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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. OHIO DEMOCRATIC PARTY</b>		<b>Transaction ID:</b> D12406 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 271 E. State Street		Amount of Each Disbursement this Period 5000.00
City Columbus State OH Zip Code 43215	Purpose of Disbursement Contribution Candidate Name Category/Type: 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. PATTY WETTERLING FOR CONGRESS</b>		<b>Transaction ID:</b> D12407 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address PO BOX 1334		Amount of Each Disbursement this Period 5000.00
City ST CLOUD State MN Zip Code 56302	Purpose of Disbursement Contribution Candidate Name Patty Wetterling Category/Type: 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Pennsylvania Democratic State Party</b>		<b>Transaction ID:</b> D12408 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 300 North Second Street 8th Floor Eighth Floor		Amount of Each Disbursement this Period 5000.00
City Harrisburg State PA Zip Code 17101	Purpose of Disbursement Contribution Candidate Name Category/Type: 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" 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)

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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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. PHYLLIS BUSANSKY FOR CONGRESS</b>		Transaction ID: D12427 Date of Disbursement 11 / 01 / 2006
Mailing Address 3611 SCHEFFLERA ROAD		Amount of Each Disbursement this Period 5000.00
City TAMPA State FL Zip Code 33618	Purpose of Disbursement Contribution Contribution <input type="checkbox"/> 011 Category/Type	
Candidate Name Phyllis Busansky	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 09	Refund of contribution requested
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. TRAUNER FOR CONGRESS</b>		Transaction ID: D12390 Date of Disbursement 11 / 01 / 2006
Mailing Address P.O. Box 1154		Amount of Each Disbursement this Period 5000.00
City Wilson State WY Zip Code 83014	Purpose of Disbursement Contribution Contribution <input type="checkbox"/> 011 Category/Type	
Candidate Name Gary Traunder	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 01	Refund of contribution requested
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. VOTEVETS</b>		Transaction ID: D12425 Date of Disbursement 11 / 03 / 2006
Mailing Address 90 PARK AVENUE 17TH FLOOR		Amount of Each Disbursement this Period 1000.00
City NEW YORK State NY Zip Code 10016	Purpose of Disbursement Contribution Contribution <input type="checkbox"/> 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Refund of contribution requested
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" 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) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Washington State Democratic Central Committee</b>		<b>Transaction ID: D12426</b> Date of Disbursement
Mailing Address P.O. Box 4027		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Seattle	State WA	Zip Code 98194
Purpose of Disbursement Contribution	<input type="text" value="011"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period <input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. WELCH FOR CONGRESS</b>		<b>Transaction ID: D12409</b> Date of Disbursement
Mailing Address PO BOX 1086		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City MONTPELIER	State VT	Zip Code 05601
Purpose of Disbursement Contribution	<input type="text" value="011"/>	
Candidate Name Peter Welch	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VT District: 00	Amount of Each Disbursement this Period <input type="text" value="5000.00"/>	

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Booker T. Washington Learning Ctr.</b>		<b>Transaction ID: D12373</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 552 W 162nd St		Amount of Each Disbursement this Period 1000.00
City New York State NY Zip Code 10032-6001	012 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Christo Rey New York High School</b>		<b>Transaction ID: D12380</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 112 East 106th Street		Amount of Each Disbursement this Period 1000.00
City New York State NY Zip Code 10029	012 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Gay Men of African Descent</b>		<b>Transaction ID: D12391</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 103 East 125th Street Suite 503		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10035-1641	012 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2100.00
<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)

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<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. Light for the Eyes</b>		<b>Transaction ID:</b> D12399 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3681 Broadway Suite 67		Amount of Each Disbursement this Period 1000.00
City New York State NY Zip Code 10031	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	012 Category/Type

Full Name (Last, First, Middle Initial) <b>B. NAACP - Legal Defence Fund</b>		<b>Transaction ID:</b> D12402 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address c/o Dwight Johnson Design 276 Fifth Avenue Suite 8		Amount of Each Disbursement this Period 1000.00
City New York State NY Zip Code 10001	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	012 Category/Type

Full Name (Last, First, Middle Initial) <b>C. New York Selah Ensemble</b>		<b>Transaction ID:</b> D12404 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 264-01 Northern Blvd		Amount of Each Disbursement this Period 1500.00
City Little Neck State NY Zip Code 11363	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	012 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3500.00
<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)

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<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)  
National Leadership PAC

Full Name (Last, First, Middle Initial) <b>A. New York State Democratic Party - Unity</b>		<b>Transaction ID: D12405</b> Date of Disbursement
Mailing Address 60 Madison Avenue		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City New York	State NY	Zip Code 10001
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/ Type <input type="text" value="012"/>
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Saint John's University School of Law</b>		<b>Transaction ID: D12414</b> Date of Disbursement
Mailing Address OF Office Alumni Relations 8000 Utopia Parkway		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Jamaica	State NY	Zip Code 11439-0001
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/ Type <input type="text" value="012"/>
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sang-Ah Sign &amp; Awning Corp</b>		<b>Transaction ID: D12415</b> Date of Disbursement
Mailing Address 24-47 45th Street		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Long Island City	State NY	Zip Code 11103
Purpose of Disbursement Printing (non-candidate)		Amount of Each Disbursement this Period <input type="text" value="400.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/ Type <input type="text" value="001"/>
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6400.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="12000.00"/>