

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Trust In Small Business 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		0.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	45996.54									
(c) Total Receipts (from Line 19)	14600.00	230950.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	60596.54	230950.00								
7. Total Disbursements (from Line 31)	58436.36	228789.82								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2160.18	2160.18								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	3136.25									

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
Trust In Small Business 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	9500.00	225750.00
(i) Itemized (use Schedule A)	100.00	200.00
(ii) Unitemized	9600.00	225950.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	5000.00	5000.00
(c) Other Political Committees (such as PACs)	14600.00	230950.00
(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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	14600.00	230950.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14600.00	230950.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	12261.36	70844.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	12261.36	70844.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	19000.00
24. Independent Expenditure (use Schedule E)	41175.00	138945.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	58436.36	228789.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	58436.36	228789.82

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)	14600.00	230950.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14600.00	230950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12261.36	70844.82
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12261.36	70844.82

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 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Trust In Small Business PAC

A. Full Name (Last, First, Middle Initial)
Kevin M. Andres

Mailing Address 4056 Glostonbury Way

City State Zip Code
Fairfax VA 22030-6070

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

Name of Employer Synertia
Occupation Chief Technology Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

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

Transaction ID: 61023.C3130

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Beth Coakley

Mailing Address PO Box 655

City State Zip Code
Merrifield VA 22116-0655

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

Name of Employer Pro Chain Solutions
Occupation Organization Consultant

Receipt For:
 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 9 / 2 0 0 6

Transaction ID: 61201.C3139

Amount of Each Receipt this Period
2500.00

Receipt

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

Mailing Address PO Box 655

City State Zip Code
Merrifield VA 22116-0655

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

Name of Employer C.J. Coakley Inc.
Occupation Project Manager

Receipt For:
 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 9 / 2 0 0 6

Transaction ID: 61201.C3138

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	5250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<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)
Trust In Small Business PAC

Full Name (Last, First, Middle Initial) A. Larry N. Francis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 38751 Bears Paw Dr		Transaction ID: 61102.C3132
City State Zip Code Murrieta CA 92562-3011	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Self Employed Occupation Self Employed Medical Doctor	Aggregate Year-to-Date ▼ 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Larry N. Francis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 38751 Bears Paw Dr		Transaction ID: 61102.C3134
City State Zip Code Murrieta CA 92562-3011	Amount of Each Receipt this Period 800.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Self Employed Occupation Self Employed Medical Doctor	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Leonor L. Lewis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 7907 Meadowbriar Ln		Transaction ID: 61201.C3137
City State Zip Code Houston TX 77063-4723	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Rodney H. Lewis Associates Occupation Rodney H. Lewis Associates Administrator	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 20
	<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)
Trust In Small Business PAC

A. Full Name (Last, First, Middle Initial)
Rodney H. Lewis

Mailing Address 7907 Meadowbriar Ln

City State Zip Code
Houston TX 77063-4723

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

Name of Employer Rodney H. Lewis Associates
Occupation Engineer

Receipt For:
 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: 61201.C3136

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Mari Patterson Rusch

Mailing Address 501 Slaters Ln Apt 1105

City State Zip Code
Alexandria VA 22314-1119

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

Name of Employer Mari & Company LLC
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: 61102.C3133

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
James F. Russell II

Mailing Address 3531 N Valley St

City State Zip Code
Arlington VA 22207-4445

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

Name of Employer McLean Funding
Occupation Investment Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: 61023.C3131

Amount of Each Receipt this Period
1000.00

Receipt

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 20	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Trust In Small Business PAC

A. Full Name (Last, First, Middle Initial)
Mark E. Sacra

Mailing Address 10027 Bayou Glen Rd

City State Zip Code
Houston TX 77042-1204

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

Name of Employer Occupation
DistribAire Inc. President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

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

Transaction ID: 61201.C3140

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	9500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 20
	(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)
Trust In Small Business PAC

A. Full Name (Last, First, Middle Initial)
Northern Lights PAC

Mailing Address PO Box 2566

City State Zip Code
Washington DC 20013-2566

FEC ID number of contributing federal political committee. **C** C00331827

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: 61201.C3135

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	5000.00

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

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

FOR LINE NUMBER: (check only one)

<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)
Trust In Small Business PAC

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: 61201.E459	
Mailing Address PO Box 53733		Date of Disbursement 11 / 14 / 2006	
City Phoenix	State AZ	Zip Code 85072-3733	Amount of Each Disbursement this Period 339.25
Purpose of Disbursement CREDIT CARD PROCESSING		Category/ Type	
Candidate Name		CREDIT CARD PROCESSING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Koch & Hoos LLC		Transaction ID: 61027.E442	
Mailing Address 901 N Washington St Ste 102		Date of Disbursement 10 / 25 / 2006	
City Alexandria	State VA	Zip Code 22314-1535	Amount of Each Disbursement this Period 2239.60
Purpose of Disbursement PAC ACCOUNTING CONSULTING		Category/ Type	
Candidate Name		PAC ACCOUNTING CONSULTING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Koch & Hoos LLC		Transaction ID: 61201.E460	
Mailing Address 901 N Washington St Ste 102		Date of Disbursement 11 / 16 / 2006	
City Alexandria	State VA	Zip Code 22314-1535	Amount of Each Disbursement this Period 1654.40
Purpose of Disbursement PAC ACCOUNTING CONSULTING		Category/ Type	
Candidate Name		PAC ACCOUNTING CONSULTING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	4233.25
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 12 / 20

<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)
Trust In Small Business PAC

Full Name (Last, First, Middle Initial) A. Mari & Co. LLC		Transaction ID: 61201.E461 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 6
Mailing Address 501 Slaters Ln Ste 1105 Marina Towers		Amount of Each Disbursement this Period 7770.00
City Alexandria State VA Zip Code 22314-1166	Category/ Type PAC FUNDRAISING CONSULTING	
Purpose of Disbursement PAC FUNDRAISING CONSULTING		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Merchant Credit Card Processing		Transaction ID: 61201.E457 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 23.65
City Hagerstown State MD Zip Code 21741-6600	Category/ Type CREDIT CARD PROCESSING	
Purpose of Disbursement CREDIT CARD PROCESSING		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Merchant Credit Card Processing		Transaction ID: 61201.E458 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 1.65
City Hagerstown State MD Zip Code 21741-6600	Category/ Type CREDIT CARD PROCESSING	
Purpose of Disbursement CREDIT CARD PROCESSING		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	7795.30
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 20

<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)
Trust In Small Business PAC

Full Name (Last, First, Middle Initial)

A. Merchant Credit Card Processing

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 61201.E456

Date of Disbursement

/ /

Amount of Each Disbursement this Period

CREDIT CARD PROCESSING

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)

PAGE 14 / 20

<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)
Trust In Small Business PAC

Full Name (Last, First, Middle Initial) A. Friends of Conrad Burns 2006		Transaction ID: 61102.E455 Date of Disbursement 11 / 02 / 2006	
Mailing Address PO Box 1596		Amount of Each Disbursement this Period 4000.00	
City Helena State MT Zip Code 59624-1596	Purpose of Disbursement CONTRIBUTION	Category/ Type	
Candidate Name CONRAD BURNS	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	CONTRIBUTION		

Full Name (Last, First, Middle Initial) B. Vern Buchanan For Congress		Transaction ID: 61201.E462 Date of Disbursement 11 / 20 / 2006	
Mailing Address PO Box 48928		Amount of Each Disbursement this Period 1000.00	
City Sarasota State FL Zip Code 34230-5928	Purpose of Disbursement DEBT RETIREMENT	Category/ Type	
Candidate Name VERNON BUCHANAN	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13	DEBT RETIREMENT		

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

5000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 / 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Trust In Small Business PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch & Hoos LLC	Nature of Debt (Purpose): PAC Accounting Consulting
Mailing Address 901 N Washington St Ste 102	
City State ZIP Code Alexandria VA 22314-1535	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: LS61204.E463	
Amount Incurred This Period <input type="text" value="1987.75"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1987.75"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Synertia	Nature of Debt (Purpose): PAC Website Support Services
Mailing Address 5500 Cherokee Ave Ste 100	
City State ZIP Code Alexandria VA 22312-2357	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: LS61204.E464	
Amount Incurred This Period <input type="text" value="1148.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1148.50"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="3136.25"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="3136.25"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Trust In Small Business PAC	FEC IDENTIFICATION NUMBER C C00423095
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates LLC

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

Mailing Address
8221 Old Courthouse Rd Ste 204

Amount
6865.00

City State Zip Code
Vienna VA 22182-3839

Transaction ID: 61027.E440
Office Sought: House State: MD
 Senate District: 03
 Presidential

Purpose of Expenditure
Cable Media Buy(10/2-5)
Category/Type

Name of Federal Candidate supported or Opposed by expenditure:
STEELE, MICHAEL

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
10705.00

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates LLC

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

Mailing Address
8221 Old Courthouse Rd Ste 204

Amount
6800.00

City State Zip Code
Vienna VA 22182-3839

Transaction ID: 61027.E439
Office Sought: House State: TN
 Senate District: 00
 Presidential

Purpose of Expenditure
Cable Media Buy(10/2-5)
Category/Type

Name of Federal Candidate supported or Opposed by expenditure:
CORKER JR, ROBERT P

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
10640.00

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	13665.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Joseph Bohm
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Trust In Small Business PAC	FEC IDENTIFICATION NUMBER C C00423095
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates LLC

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

Mailing Address
8221 Old Courthouse Rd Ste 204

Amount
4050.00

City State Zip Code
Vienna VA 22182-3839

Transaction ID: 61027.E441
Office Sought: House State: WA
 Senate District: 00
 Presidential

Purpose of Expenditure
Cable Media Buy(10/2-5)
Category/Type

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
MCGAVICK, MICHAEL SEAN

Disbursement For: Primary General 2006
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
7890.00

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates LLC

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

Mailing Address
8221 Old Courthouse Rd Ste 204

Amount
3840.00

City State Zip Code
Vienna VA 22182-3839

Transaction ID: 61027.E446
Office Sought: House State: MD
 Senate District: 03
 Presidential

Purpose of Expenditure
Ad Production(11/16-06)
Category/Type

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
STEELE, MICHAEL

Disbursement For: Primary General 2006
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
10705.00

(a) SUBTOTAL of Itemized Independent Expenditures	7890.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Joseph Bohm
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Trust In Small Business PAC	FEC IDENTIFICATION NUMBER C C00423095
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates LLC

Mailing Address
8221 Old Courthouse Rd Ste 204

City State Zip Code
Vienna VA 22182-3839

Purpose of Expenditure Category/Type
Ad Production(11/16/-06)

Name of Federal Candidate supported or Opposed by expenditure:
MCGAVICK, MICHAEL SEAN

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: 61027.E445

Office Sought: House State: WA
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates LLC

Mailing Address
8221 Old Courthouse Rd Ste 204

City State Zip Code
Vienna VA 22182-3839

Purpose of Expenditure Category/Type
Ad Production(11/16/-06)

Name of Federal Candidate supported or Opposed by expenditure:
BACHMANN, MICHELE M

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: 61027.E449

Office Sought: House State: MN
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="7680.00"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	<input type="text" value="0.00"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Joseph Bohm
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Trust In Small Business PAC	FEC IDENTIFICATION NUMBER C C00423095
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates LLC

Mailing Address
8221 Old Courthouse Rd Ste 204

City Vienna	State VA	Zip Code 22182-3839
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Purpose of Expenditure Ad Production(11/16/-06)	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
CORKER JR, ROBERT P

Calendar Year-To-Date Per Election for Office Sought	10640.00
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Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Amount
3840.00

Transaction ID: 61027.E447

Office Sought: House State: TN
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Edmonds Associates LLC

Mailing Address
8221 Old Courthouse Rd Ste 204

City Vienna	State VA	Zip Code 22182-3839
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Purpose of Expenditure Cable Media Buy(10/2-5)	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
BACHMANN, MICHELE M

Calendar Year-To-Date Per Election for Office Sought	11940.00
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Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Amount
8100.00

Transaction ID: 61027.E438

Office Sought: House State: MN
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	11940.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	41175.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Joseph Bohm
Signature

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

Image# 26930590588

Form/Schedule: **F3XN** Koch & Hoos LLC services are inclusive of personnel and office overhead to include supplies, telephone service,
Transaction ID: **C00423095** utilities, and office equipment.
