

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

MasterCard International Inc. Employees' PAC

ADDRESS (number and street) 2000 Purchase St.

Check if different than previously reported. (ACC) Purchase NY 10577

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00410274

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on 11 / 04 / 2014 in the State of 0

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on / / in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 2014

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

Type or Print Name of Treasurer Althea Hutchinson

Signature of Treasurer Althea Hutchinson [Electronically Filed] Date 10 / 22 / 2014

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**MasterCard International Inc. Employees' PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="71429.64"/>	<input type="text" value="71429.64"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="78692.47"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10053.83"/>	<input type="text" value="145517.30"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="88746.30"/>	<input type="text" value="216946.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19694.19"/>	<input type="text" value="147894.83"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="69052.11"/>	<input type="text" value="69052.11"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**MasterCard International Inc. Employees' PAC**

Report Covering the Period: From:  /  /  To:  /  /

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		
(i) Itemized (use Schedule A).....	9623.33	128230.30
(ii) Unitemized .....	430.50	17287.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10053.83	145517.30
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10053.83	145517.30
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 Transfers (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))..... ▶	10053.83	145517.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10053.83	145517.30

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	44.19	1644.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	44.19	1644.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19650.00	146250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	19694.19	147894.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19694.19	147894.83

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	10053.83	145517.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10053.83	145517.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	44.19	1644.83
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	44.19	1644.83

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

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

FOR LINE NUMBER: PAGE 6 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Sheryl Andrasko**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
 O Fallon MO 63368-7263

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

Name of Employer Occupation  
 MasterCard VP/Information Tech

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-17-10-22**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. Kimberly Attard**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
 O Fallon MO 63368-7263

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

Name of Employer Occupation  
 MasterCard Business Leader, Systems Support

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-24-10-22**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. Tim Berger**

Mailing Address 2000 Purchase St

City State Zip Code  
 Purchase NY 10577-2405

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

Name of Employer Occupation  
 MasterCard Group Executive, Tax

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-37-10-22**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Vijay Bhuvanagiri**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
 O Fallon MO 63368-7263

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

Name of Employer Occupation  
 MasterCard SBL Enterprise Architecture

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-6-10-22**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. Gregory Box**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
 O Fallon MO 63368-7263

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

Name of Employer Occupation  
 MasterCard VP Technology Account Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 620.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-91-10-22**

Amount of Each Receipt this Period  
 62.00

Full Name (Last, First, Middle Initial)  
**C. Ed Brandt**

Mailing Address 200 Bellevue Pkwy  
 Ste 500

City State Zip Code  
 Wilmington DE 19809-3741

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

Name of Employer Occupation  
 MasterCard General Manager, Chase

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-32-10-22**

Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 312.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Angie Buss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Systems Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-76-10-22**  
 Amount of Each Receipt this Period  
 50.00

**B. Jim Carrington**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Global Product Group Executive, Global  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-13-10-22**  
 Amount of Each Receipt this Period  
 225.00

**C. Kevin Carroll**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Product Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-78-10-22**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 35
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Joe Casale**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 Manhattanville Rd

City State Zip Code  
Purchase NY 10577-2134

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

Name of Employer Occupation  
MasterCard Business Leader, Product Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 20141013-36-10-22**

Amount of Each Receipt this Period  
750.00

**B. Jr Caughey**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City State Zip Code  
Purchase NY 10577-2405

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

Name of Employer Occupation  
MasterCard Finance Leader, Financial Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 20141013-89-10-22**

Amount of Each Receipt this Period  
100.00

**C. Diane Dann**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City State Zip Code  
Purchase NY 10577-2405

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

Name of Employer Occupation  
MasterCard VP/Counsel Sr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 20141013-55-10-22**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Colm Dobbyn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation SVP/Asst. General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-53-10-22**  
 Amount of Each Receipt this Period  
 125.00

**B. Patrick Dwyer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Consumer & Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-77-10-22**  
 Amount of Each Receipt this Period  
 26.00

**C. Michael Ellison**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Financial Analysis  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-65-10-22**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 35
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Marianne Fogarty**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Audit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141013-26-10-22**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Tucker Foote**

Mailing Address 2020 12th St NW Apt 704

City Washington State DC Zip Code 20009-7591

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 05 / 2014**

**Transaction ID : 4EB0A05F91032E2E8B4C**

Amount of Each Receipt this Period  
**170.00**

Full Name (Last, First, Middle Initial)  
**C. Thomas Gannon**

Mailing Address 1401 I St NW Ste 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141013-95-10-22**

Amount of Each Receipt this Period  
**140.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>410.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Ron Garrow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Group Head, Talent Acquisition, Manage  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-12-10-22**  
 Amount of Each Receipt this Period  
 200.00  
 Aggregate Year-to-Date ▼  
 2000.00

**B. Bart Goldstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Group Head, Sec and Governance  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-50-10-22**  
 Amount of Each Receipt this Period  
 25.00  
 Aggregate Year-to-Date ▼  
 250.00

**C. Julia Gosset**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Manhattanville Rd  
 City Purchase State NY Zip Code 10577-2134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Product Leader, Product Management  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-38-10-22**  
 Amount of Each Receipt this Period  
 25.00  
 Aggregate Year-to-Date ▼  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 35
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Sidney Gottesman**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Head, Technology Integration

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : 20141013-4-10-22**

Amount of Each Receipt this Period  
 50.00

**B. Roger Griffith**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Settlement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : 20141013-61-10-22**

Amount of Each Receipt this Period  
 100.00

**C. Maria Haluska**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Leader, Shareholder Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : 20141013-87-10-22**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Sherri Haymond**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-39-10-22**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. Greg Howes**

Mailing Address Remote

City Raleigh State NC Zip Code 27640-0001

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

Name of Employer MasterCard Occupation Global Solutions Leader

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-58-10-22**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. Ron Hynes**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Senior Business Leader, Product Manage

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-86-10-22**

Amount of Each Receipt this Period  
 225.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Dale Jenkins**  
Full Name (Last, First, Middle Initial)

Mailing Address Remote

City Remote State TN Zip Code 37934

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

Name of Employer MasterCard Occupation Consultant, Business Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-48-10-22**

Amount of Each Receipt this Period  
 250.00

**B. Fred Kaynor**  
Full Name (Last, First, Middle Initial)

Mailing Address 2999 Oak Rd Ste 1020

City Walnut Creek State CA Zip Code 94597-1983

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

Name of Employer MasterCard Occupation VP/Sponsorships

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-97-10-22**

Amount of Each Receipt this Period  
 0.00

**C. Gary Kearns**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 Manhattanville Rd

City Purchase State NY Zip Code 10577-2134

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

Name of Employer MasterCard Occupation Group Executive, Information Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-96-10-22**

Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Joan Kelly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation SVP/Systems Enhancement Stratg  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-60-10-22**  
 Amount of Each Receipt this Period  
 290.00

**B. Beth Kitchener**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Manhattanville Rd  
 City Purchase State NY Zip Code 10577-2134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Bus Leader, Public Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-2-10-22**  
 Amount of Each Receipt this Period  
 100.00

**C. Claire Le Gal**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Business Leader, Fraud Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-72-10-22**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 440.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 17 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Randall Leonard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5555 Winghaven Blvd  
 City O Fallon State MO Zip Code 63368-3625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Systems Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-69-10-22**  
 Amount of Each Receipt this Period  
 250.00

**B. Dana Lorberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation SVP/Global Operations Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-29-10-22**  
 Amount of Each Receipt this Period  
 1500.00

**C. Michael Luchinsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation SBL Mergers & Acquisitions  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-11-10-22**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial) <b>A. Raja Madabhushi</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141013-85-10-22</b>		
Mailing Address 2000 Purchase St			Amount of Each Receipt this Period 300.00		
City Purchase	State NY	Zip Code 10577-2405			
FEC ID number of contributing federal political committee. C					
Name of Employer MasterCard		Occupation Chief Marketing Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2100.00			

Full Name (Last, First, Middle Initial) <b>B. Tara Maguire</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141013-101-10-22</b>		
Mailing Address 2000 Purchase St			Amount of Each Receipt this Period 300.00		
City Purchase	State NY	Zip Code 10577-2405			
FEC ID number of contributing federal political committee. C					
Name of Employer MasterCard		Occupation VP/Assistant Controller			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00			

Full Name (Last, First, Middle Initial) <b>C. Michael Manchisi</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141013-45-10-22</b>		
Mailing Address 5555 Winghaven Blvd			Amount of Each Receipt this Period 416.00		
City O Fallon	State MO	Zip Code 63368-3625			
FEC ID number of contributing federal political committee. C					
Name of Employer MasterCard		Occupation SVP/Operations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4160.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1016.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 35
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. James Mandella**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Program Leader, Fraud Prevention Solut

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-47-10-22**

Amount of Each Receipt this Period  
 50.00

**B. Kimberly Martin**  
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-16-10-22**

Amount of Each Receipt this Period  
 40.00

**C. Jill Matson**  
Full Name (Last, First, Middle Initial)

Mailing Address 200 Bellevue Pkwy Ste 500

City Wilmington State DE Zip Code 19809-3741

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

Name of Employer MasterCard Occupation Account Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-62-10-22**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael McEneny**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Deputy General Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3333.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-74-10-22**

Amount of Each Receipt this Period  
 333.33

Full Name (Last, First, Middle Initial)  
**B. Chris McWilton**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Chief Financial Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 4160.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-81-10-22**

Amount of Each Receipt this Period  
 416.00

Full Name (Last, First, Middle Initial)  
**C. Amy Milam**

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Product Leader, Product Account Suppor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-92-10-22**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 799.33

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

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

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

FOR LINE NUMBER: PAGE 21 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Shawn Miles**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-33-10-22**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. Timothy Murphy**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 4160.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-79-10-22**

Amount of Each Receipt this Period  
 416.00

Full Name (Last, First, Middle Initial)  
**C. Nancy O'Malley**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Chf Pymt Sys Integrity Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-1-10-22**

Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 666.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 35
	<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)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial) <b>A. John Pagano</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141013-49-10-22</b>
Mailing Address 2000 Purchase St			Amount of Each Receipt this Period 250.00
City Purchase	State NY	Zip Code 10577-2405	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 250.00
Name of Employer MasterCard		Occupation VP/Accounting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Larry Patterson</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141013-5-10-22</b>
Mailing Address Remote			Amount of Each Receipt this Period 100.00
City Remote	State WI	Zip Code 53708	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1000.00
Name of Employer MasterCard		Occupation Account Leader - 501152	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Chris Pitcher</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141013-67-10-22</b>
Mailing Address 2000 Purchase St			Amount of Each Receipt this Period 300.00
City Purchase	State NY	Zip Code 10577-2405	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 300.00
Name of Employer MasterCard		Occupation Finance Leader, Global Supply Manageme	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 35
	<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)  
**MasterCard International Inc. Employees' PAC**

**A. Steve Potter**  
Full Name (Last, First, Middle Initial)

Mailing Address 9830 Colonnade Blvd  
Ste 170

City San Antonio State TX Zip Code 78230-2297

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

Name of Employer MasterCard Occupation Account Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141013-84-10-22**

Amount of Each Receipt this Period  
100.00

**B. Mike Prusaczyk**  
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Senior Business Leader, Software Engin

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141013-63-10-22**

Amount of Each Receipt this Period  
100.00

**C. Rob Reeg**  
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4160.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141013-18-10-22**

Amount of Each Receipt this Period  
416.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 616.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Mike Rethorn**

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Information Tech

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1125.00**

Date of Receipt  
**10 / 15 / 2014**  
**Transaction ID : 20141013-54-10-22**

Amount of Each Receipt this Period  
**225.00**

Full Name (Last, First, Middle Initial)  
**B. Eduardo Santos**

Mailing Address 801 Brickell Ave Ste 1300

City Miami State FL Zip Code 33131-2945

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

Name of Employer MasterCard Occupation Senior Business Leader, Public Policy

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**10 / 15 / 2014**  
**Transaction ID : 20141013-51-10-22**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. Joe Schuler**

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Leader, Systems Programming

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt  
**10 / 15 / 2014**  
**Transaction ID : 20141013-43-10-22**

Amount of Each Receipt this Period  
**85.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **360.00**

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

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

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

FOR LINE NUMBER: PAGE 25 OF 35  
(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)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)  
**A. Eileen Simon**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141013-93-10-22**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Jack Sinnott**

Mailing Address 801 Brickell Ave Ste 1200

City Miami State FL Zip Code 33131-2951

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

Name of Employer MasterCard Occupation Bus Leader, Sec & Risk Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141013-10-10-22**

Amount of Each Receipt this Period  
**90.00**

Full Name (Last, First, Middle Initial)  
**C. Joseph Swezey**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141013-14-10-22**

Amount of Each Receipt this Period  
**124.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **314.00**

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

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

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

FOR LINE NUMBER: PAGE 26 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Jason Taylor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Manhattanville Rd  
 City State Zip Code  
 Purchase NY 10577-2134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MasterCard Account Manager, Senior  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-7-10-22**  
 Amount of Each Receipt this Period  
 50.00

**B. Donna Terman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City State Zip Code  
 Purchase NY 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MasterCard VP/Bus Resources-Communication  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-34-10-22**  
 Amount of Each Receipt this Period  
 150.00

**C. Stephen Treacy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City State Zip Code  
 Purchase NY 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MasterCard Business Leader, Fraud Reporting and A  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-21-10-22**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial) <b>A. Frank Tufano</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141013-23-10-22</b>
Mailing Address 2000 Purchase St		Amount of Each Receipt this Period 290.00
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation Group Head Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2900.00	

Full Name (Last, First, Middle Initial) <b>B. Timothy Tyler</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141013-35-10-22</b>
Mailing Address 2000 Purchase St		Amount of Each Receipt this Period 100.00
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer MasterCard	Occupation VP/Audit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Mark Valente</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141013-8-10-22</b>
Mailing Address 2000 Purchase St		Amount of Each Receipt this Period 50.00
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MasterCard	Occupation Senior Business Leader, Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 28 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Gary Vonderhaar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Systems Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-90-10-22**  
 Amount of Each Receipt this Period  
 300.00

**B. Susan Warner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Senior Business Leader, WorldWide Comm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-94-10-22**  
 Amount of Each Receipt this Period  
 150.00

**C. Timothy Westendorf**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Financial Systems  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-52-10-22**  
 Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 29 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MasterCard International Inc. Employees' PAC**

**A. Shirley White-Ellul**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Consultant, Project Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-25-10-22**  
 Amount of Each Receipt this Period  
 50.00

**B. Amy Winders**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Mastercard Blvd  
 City O Fallon State MO Zip Code 63368-7263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation Sr. Consultant, Technology Account Man  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-46-10-22**  
 Amount of Each Receipt this Period  
 50.00

**C. Mimi Wood**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Purchase St  
 City Purchase State NY Zip Code 10577-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MasterCard Occupation VP/Human Resources  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141013-40-10-22**  
 Amount of Each Receipt this Period  
 124.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 224.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 30 OF 35  
(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)  
**MasterCard International Inc. Employees' PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Kent Young**

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Business Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141013-56-10-22**

Amount of Each Receipt this Period  
**130.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>9623.33</b>

**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

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)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address 411 King St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 02 / 2014

**Transaction ID : 47D3AEC7A8F217F2A3B**

Amount of Each Disbursement this Period

44.19

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

44.19

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

44.19

**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

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)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Anna Eshoo for Congress**

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
2014 General

011

Candidate Name

**Anna G. Eshoo**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 18

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 07 / 2014

**Transaction ID : 38A226E96F70B135810**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Beatty for Congress**

Mailing Address PO Box 172

City Columbus State OH Zip Code 43216

Purpose of Disbursement  
2014 General

011

Candidate Name

**Joyce Beatty**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 07 / 2014

**Transaction ID : 14123347B1252A5ED2A**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Boehner for Speaker**

Mailing Address 320 First St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2014 Contribution

011

Candidate Name

**Boehner for Speaker**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: Contribution

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 10 / 2014

**Transaction ID : 73242480C0B3F719EEA**

Amount of Each Disbursement this Period

2500.00

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

5000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Citizens for Waters**

Mailing Address 3700 Wilshire Blvd., Ste. 1050-B

City Los Angeles State CA Zip Code 90010

Purpose of Disbursement  
2014 General

011

Category/  
Type

Candidate Name

**Maxine Waters**

Office Sought:  House  
 Senate  
 President  
State: CA District: 43

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2014

**Transaction ID : F0D981B1820076328D7**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. David Scott for Congress**

Mailing Address PO Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement  
2014 General

011

Category/  
Type

Candidate Name

**David Albert Scott**

Office Sought:  House  
 Senate  
 President  
State: GA District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2014

**Transaction ID : CB437F9540E33ED8E7B**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Democrats Win Seats (DWS PAC)**

Mailing Address PO Box 83142

City Gaithersburg State MD Zip Code 20883

Purpose of Disbursement  
2014 Contribution

011

Category/  
Type

Candidate Name

**Democrats Win Seats (DWS PAC)**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼ Contribution

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2014

**Transaction ID : AA9E13D01B73F311739**

Amount of Each Disbursement this Period

5000.00

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

9500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Bennie Thompson**

Mailing Address PO Box 100

City Bolton State MS Zip Code 39041

Purpose of Disbursement  
2014 General

011

Candidate Name

**Bennie G. Thompson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MS District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2014			

**Transaction ID : AAC42F1AFC095E1BEF6**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of Jim Clyburn**

Mailing Address Post Office Box 12567

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
2014 General

011

Candidate Name

**James E. Clyburn**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: SC District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2014			

**Transaction ID : A1DA8757FF246754406**

Amount of Each Disbursement this Period

1500.00
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Full Name (Last, First, Middle Initial)

**C. Karen Bass for Congress**

Mailing Address 777 S. Figueroa Street  
Suite 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement  
2014 General

011

Candidate Name

**Karen R. Bass**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 37

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2014			

**Transaction ID : ED73FEA79F7413C9BF7**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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