

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
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** 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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2006 through 07 31 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Ms. Linda Kirkpatrick  
Signature of Treasurer Electronically Filed by Ms. Linda Kirkpatrick Date 08 18 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
MasterCard International Inc. Employees' PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		23174.03
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	50204.73									
(c) Total Receipts (from Line 19) .....	7937.55	145946.21								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	58142.28	169120.24								
7. Total Disbursements (from Line 31) .....	7518.52	118496.48								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	50623.76	50623.76								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
MasterCard International Inc. Employees' PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7776.55	140335.21
(i) Itemized (use Schedule A) .....	161.00	5611.00
(ii) Unitemized .....	7937.55	145946.21
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....	7937.55	145946.21
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)) .....	7937.55	145946.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7937.55	145946.21

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	18.52	1860.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	18.52	1860.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	115600.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1036.00
(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	1036.00
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))..	7518.52	118496.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	7518.52	118496.48

**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) .....	7937.55	145946.21
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1036.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7937.55	144910.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18.52	1860.48
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18.52	1860.48

# 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 / 22
	<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.** Full Name (Last, First, Middle Initial)  
Gregory Box

Mailing Address 2200 MasterCard Boulevard

City State Zip Code  
O Fallon MO 63366-7263

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

Name of Employer MasterCard Occupation VP Technology Account Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 434.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

**Transaction ID:** 20060719-43-13-54

Amount of Each Receipt this Period  
62.00

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

Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577-2509

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

Name of Employer MasterCard Occupation VP/Business Administration

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

**Transaction ID:** 20060719-1-13-54

Amount of Each Receipt this Period  
50.00

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

Mailing Address 2200 MasterCard Boulevard

City State Zip Code  
O Fallon MO 63366-7263

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

Name of Employer MasterCard Occupation SEVP/Global Tech Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

**Transaction ID:** 20060719-4-13-54

Amount of Each Receipt this Period  
416.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	528.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 22
	<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.</b> Michael Ellison		Date of Receipt MM / DD / YYYY 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-38-13-54
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer MasterCard	Occupation VP/Financial Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Anna May Feige		Date of Receipt MM / DD / YYYY 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-5-13-54
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation Global Group Practice Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Gareth Forsey		Date of Receipt MM / DD / YYYY 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-37-13-54
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation SVP/Cust Business Plan/Analys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2030.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>630.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 8 / 22</span>
	(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) <b>A.</b> John Gallagher		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006	
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-6-13-54	
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 124.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MasterCard	Occupation VP/Financial Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 744.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Noah Hanft		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006	
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-42-13-54	
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 416.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MasterCard	Occupation General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1664.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Alan Heuer		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006	
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-7-13-54	
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 416.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MasterCard	Occupation Chief Operating Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2912.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>956.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 22
	<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.** Full Name (Last, First, Middle Initial)  
Robert Hoffman

Mailing Address 2200 MasterCard Boulevard

City State Zip Code  
O Fallon MO 63366-7263

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 ▼ 210.00

Date of Receipt  
07 / 15 / 2006

**Transaction ID:** 20060719-8-13-54

Amount of Each Receipt this Period  
42.00

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

Mailing Address 2200 MasterCard Boulevard

City State Zip Code  
O Fallon MO 63366-7263

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

Name of Employer MasterCard Occupation Group Head, Engineering Srvcs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 868.00

Date of Receipt  
07 / 15 / 2006

**Transaction ID:** 20060719-41-13-54

Amount of Each Receipt this Period  
124.00

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

Mailing Address 2200 MasterCard Boulevard

City State Zip Code  
O Fallon MO 63366-7263

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 ▼ 2030.00

Date of Receipt  
07 / 15 / 2006

**Transaction ID:** 20060719-9-13-54

Amount of Each Receipt this Period  
290.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>456.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 22
	<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.** Full Name (Last, First, Middle Initial)  
Linda Locke

Mailing Address 2200 MasterCard Boulevard

City State Zip Code  
O Fallon MO 63366-7263

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

Name of Employer MasterCard Occupation VP/Public Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 434.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

**Transaction ID:** 20060719-30-13-54

Amount of Each Receipt this Period  
62.00

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

Mailing Address 2200 MasterCard Boulevard

City State Zip Code  
O Fallon MO 63366-7263

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

Name of Employer MasterCard Occupation SVP/Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2030.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

**Transaction ID:** 20060719-11-13-54

Amount of Each Receipt this Period  
290.00

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

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code  
Miami FL 33131-4945

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

Name of Employer MasterCard Occupation EVP/North America Region

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

**Transaction ID:** 20060719-12-13-54

Amount of Each Receipt this Period  
290.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>642.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 22
	<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) <b>A.</b> Bill Mathis		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-46-13-54
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 290.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation SVP/Account Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2030.00	

Full Name (Last, First, Middle Initial) <b>B.</b> John McAndrew		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-14-13-54
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 290.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation VP/Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1864.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Chris McWilton		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-32-13-54
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 291.67	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2041.69	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	871.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 22
	<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.</b> John Meister		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2200 MasterCard Boulevard		<b>Transaction ID:</b> 20060719-33-13-54
City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard Occupation VP/Systems Development	Aggregate Year-to-Date ▼ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Shawn Miles		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-27-13-54
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard Occupation VP/Counsel Sr	Aggregate Year-to-Date ▼ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Sandy Morris		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2055 Sugarloaf Circle		<b>Transaction ID:</b> 20060719-15-13-54
City State Zip Code Duluth GA 30097	Amount of Each Receipt this Period 124.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard Occupation SVP/Member Relations	Aggregate Year-to-Date ▼ 1034.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	324.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Timothy Murphy		Date of Receipt MM / DD / YYYY 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-16-13-54
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 290.00
Name of Employer MasterCard	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2030.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Patrick O'Sullivan		Date of Receipt MM / DD / YYYY 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-44-13-54
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation VP/Financial Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 868.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Joshua Peirez		Date of Receipt MM / DD / YYYY 07 / 04 / 2006
Mailing Address 233 E 70th St Apt 14P		<b>Transaction ID:</b> 48308-95425051450730
City New York	State NY	Zip Code 10021-5228
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 416.88
Name of Employer MasterCard	Occupation SVP/Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2915.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	830.88
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 22
	<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

<b>A.</b> Full Name (Last, First, Middle Initial) Sergio Pinon Mailing Address 801 Brickell Avenue Suite 130 City Miami State FL Zip Code 33131-4945 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2006 <b>Transaction ID:</b> 20060719-18-13-54 Amount of Each Receipt this Period 290.00
Name of Employer MasterCard Occupation SVP/Security and Risk Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1450.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Douglas Raymond Mailing Address 16 Gray Squirrel Drive City New Haven State CT Zip Code 10577-2509 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 29 / 2006 <b>Transaction ID:</b> 44454-86326235532761 Amount of Each Receipt this Period 200.00
Name of Employer MasterCard Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1290.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Bob Reany Mailing Address 2200 MasterCard Boulevard City O Fallon State MO Zip Code 63366-7263 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2006 <b>Transaction ID:</b> 20060719-28-13-54 Amount of Each Receipt this Period 110.00
Name of Employer MasterCard Occupation VP/Information Tech Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 22
	<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. Rob Reeg</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2200 MasterCard Boulevard		<b>Transaction ID: 20060719-29-13-54</b>
City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 290.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation SVP/Systems Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2030.00	

Full Name (Last, First, Middle Initial) <b>B. Larry Resch</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2200 MasterCard Boulevard		<b>Transaction ID: 20060719-19-13-54</b>
City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 124.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation VP/Processing Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 868.00	

Full Name (Last, First, Middle Initial) <b>C. Joe Rubin</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 1401 Eye Street N.W. Suite 2		<b>Transaction ID: 20060719-20-13-54</b>
City State Zip Code Washington DC 20005-2225	Amount of Each Receipt this Period 124.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation VP/Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 868.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	538.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 22
	<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.</b> John Scariot		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2200 MasterCard Boulevard		<b>Transaction ID:</b> 20060719-47-13-54
City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 124.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation VP/Financial Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 868.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Edgar Smart		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2200 MasterCard Boulevard		<b>Transaction ID:</b> 20060719-34-13-54
City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 124.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation VP/Systems Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 868.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Carey Smith		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-35-13-54
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 124.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation VP/Risk Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 868.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	372.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 17 / 22
	(check only one)	
	<input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Ron Steinbruegge

Mailing Address 2200 MasterCard Boulevard

City State Zip Code  
O Fallon MO 63366-7263

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

Name of Employer MasterCard Occupation VP/Network Communic

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 868.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

Transaction ID: 20060719-39-13-54

Amount of Each Receipt this Period  
124.00

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

Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577-2509

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 ▼ 868.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

Transaction ID: 20060719-31-13-54

Amount of Each Receipt this Period  
124.00

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

Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577-2509

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

Name of Employer MasterCard Occupation VP/Bus Resources-Communication

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 434.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

Transaction ID: 20060719-21-13-54

Amount of Each Receipt this Period  
62.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>310.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 22
	<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) <b>A.</b> Robert Trende		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2200 MasterCard Boulevard		<b>Transaction ID:</b> 20060719-23-13-54
City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation VP/Systems Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Lillian Tropea		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-24-13-54
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 124.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MasterCard	Occupation VP/Accounting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 868.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Frank Tufano		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-40-13-54
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 290.00	
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ 2030.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	464.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 22
	(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) <b>A.</b> Mimi Wood		Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2006	
Mailing Address 2000 Purchase Street		<b>Transaction ID:</b> 20060719-25-13-54	
City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 124.00		
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation VP/Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 868.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Kent Young		Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2006	
Mailing Address 2200 MasterCard Boulevard		<b>Transaction ID:</b> 20060719-26-13-54	
City State Zip Code O Fallon MO 63366-7263	Amount of Each Receipt this Period 130.00		
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation VP/Business Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 910.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	254.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	7776.55

# 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 20 / 22

<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)  
MasterCard International Inc. Employees' PAC

Full Name (Last, First, Middle Initial) <b>A. PNC Bank</b>		Transaction ID: 21006-33453005552292	
Mailing Address 411 King St.		Date of Disbursement 07 / 05 / 2006	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 18.52
Purpose of Disbursement Credit Card Fee		001	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

18.52

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

18.52

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Baker for Congress Committee</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Post Office Box 1694</p> <p>City Baton Rouge State LA Zip Code 70821</p> <p>Purpose of Disbursement 2006 Primary</p> <p>Candidate Name Richard Baker</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 98448-0266229510307</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>011 Category/ Type</p>
--	--	---

<p><b>B.</b> Citizens for Biden</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 371</p> <p>City Wilmington State DE Zip Code 19899</p> <p>Purpose of Disbursement 2008 Primary</p> <p>Candidate Name Joseph Biden</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 46056-2919885516166</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>011 Category/ Type</p>
---	--	---

<p><b>C.</b> Friends of Joe Lieberman</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 231294 State House Square</p> <p>City State House Square State CT Zip Code 06123</p> <p>Purpose of Disbursement 2006 Primary</p> <p>Candidate Name Joseph Lieberman</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 46056-4836389422416</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>011 Category/ Type</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="5500.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**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 22 / 22

<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) <b>A. Hatch Election Committee Inc</b>		<b>Transaction ID:</b> 46056-3182184100151 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 6
Mailing Address 175 South West Temple Suite 650		Amount of Each Disbursement this Period 1000.00
City Salt Lake City State UT Zip Code 84101	011 Category/ Type	
Purpose of Disbursement 2006 General		
Candidate Name Orrin Hatch		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jon Kyl for U S Senate</b>		<b>Transaction ID:</b> 46056-6791192889213 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 6
Mailing Address PO Box 10246		Amount of Each Disbursement this Period 1000.00
City Phoenix State AZ Zip Code 85064	011 Category/ Type	
Purpose of Disbursement 2006 Primary		
Candidate Name Jon Kyl		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

2000.00

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

7500.00