

# 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  
FAA Managers Association Inc. PAC

ADDRESS (number and street) 888 16th Street NW  
Suite 530  
 Check if different than previously reported. (ACC)  
Washington DC 20006

2. **FEC IDENTIFICATION NUMBER** C00366070  
**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 09 30 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 Mr. Louis H Dupart

Signature of Treasurer Electronically Filed by Mr. Louis H Dupart Date 03 05 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
FAA Managers Association Inc. 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	9

D	D
3	0

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		99907.04
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	126785.04									
(c) Total Receipts (from Line 19) .....	25816.00	73396.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	152601.04	173303.04								
7. Total Disbursements (from Line 31) .....	70000.00	90702.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	82601.04	82601.04								
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  
FAA Managers Association Inc. 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	9

D	D
3	0

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	10367.00	18507.00
(i) Itemized (use Schedule A) .....	15449.00	54889.00
(ii) Unitemized .....	25816.00	73396.00
(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) .....	25816.00	73396.00
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)) .....	25816.00	73396.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	25816.00	73396.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	202.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	202.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	70000.00	90500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	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))..	70000.00	90702.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	70000.00	90702.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	25816.00	73396.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25816.00	73396.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	202.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	202.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 39
	<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)  
**FAA Managers Association Inc. PAC**

<b>A.</b> Full Name (Last, First, Middle Initial) Harold A Albert		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 39320 Tollhouse Road		<b>Transaction ID:</b> SA11A1.4591
City Lovettsville	State VA	Zip Code 20180
Amount of Each Receipt this Period 140.00		Biweekly payroll deduction
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b> Full Name (Last, First, Middle Initial) David H Alford		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 19309 Moon Drive		<b>Transaction ID:</b> SA11A1.4593
City Tehachapi	State CA	Zip Code 93561
Amount of Each Receipt this Period 175.00		Biweekly payroll deduction
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Thomas P Anderson		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 18791 Talarik Drive		<b>Transaction ID:</b> SA11A1.4596
City Eagle River	State AR	Zip Code 99577
Amount of Each Receipt this Period 105.00		Biweekly payroll deduction
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	420.00
<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 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Alexander Appelhans, Jr.

Mailing Address 2254 Smallwood Drive

City State Zip Code  
Ft. Collins CO 80525-8521

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4597

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

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

Mailing Address 177 Castaway Trail

City State Zip Code  
Moorseville NC 28115

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4601

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

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

Mailing Address 9460 Live Oak Place #104

City State Zip Code  
Ft. Lauderdale FL 33324

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4612

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	490.00
<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 8 / 39
	<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)  
FAA Managers Association Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Donna L Betz Mailing Address 5 Bon Ave. City Merrimack State NH Zip Code 03054 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.4617 Amount of Each Receipt this Period 105.00 Biweekly payroll deduction
Name of Employer: FAA Managers Association Occupation: Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Dana T Boucher Mailing Address 5815 El Monte City Fairway State KS Zip Code 66205 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.4628 Amount of Each Receipt this Period 105.00 Biweekly payroll deduction
Name of Employer: FAA Managers Association Occupation: Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Glenn O Bridgeman, II Mailing Address 9516 Ballagan Ct City Bristow State VA Zip Code 20136 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.4634 Amount of Each Receipt this Period 20.00 Biweekly payroll deduction
Name of Employer: FAA Managers Association Occupation: Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	230.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 39
	<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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Pamela Burger		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 9175 Kearny Villa Road		Transaction ID: SA11A1.4643	
City State Zip Code San Diego CA 92126	Amount of Each Receipt this Period 140.00		
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction		
Name of Employer Occupation FAA Managers Association Supervisor	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Daniel C Bussey		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 4897 Alijoanne Road		Transaction ID: SA11A1.4648	
City State Zip Code Brighton MI 48116	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction		
Name of Employer Occupation FAA Managers Association Supervisor	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> John J Cahill		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 20 Jennifer Drive		Transaction ID: SA11A1.4650	
City State Zip Code Wappingers Falls NY 12590	Amount of Each Receipt this Period 84.00		
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction		
Name of Employer Occupation FAA Managers Association Supervisor	Aggregate Year-to-Date ▼ 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	329.00
<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 10 / 39
	<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)  
**FAA Managers Association Inc. PAC**

<b>A.</b> Full Name (Last, First, Middle Initial) Norman T Cain		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address		<b>Transaction ID:</b> SA11A1.4651
City State Zip Code		Amount of Each Receipt this Period 105.00
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) John J Callahan, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 38905 Bear Creek		<b>Transaction ID:</b> SA11A1.4652
City State Zip Code Grafton OH 44044		Amount of Each Receipt this Period 115.00
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mary R Carbonaro		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 156 Ridgeland Drive		<b>Transaction ID:</b> SA11A1.4655
City State Zip Code Amherst OH 44001		Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	305.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 39
	<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)  
**FAA Managers Association Inc. PAC**

Full Name (Last, First, Middle Initial) <b>A. Randy W Carlson</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 12979 North 66th Street		<b>Transaction ID: SA11A1.4657</b>	
City State Zip Code Longmont CO 80503	Amount of Each Receipt this Period 140.00		
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction		
Name of Employer FAA Managers Association	Occupation Supervisor	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Marianna M Carnes</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 15507 Darrow Road		<b>Transaction ID: SA11A1.4658</b>	
City State Zip Code Vermilion OH 44089	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction		
Name of Employer FAA Managers Association	Occupation Supervisor	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Jacquelyn M Christian</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 88 South Bonneymead Circle		<b>Transaction ID: SA11A1.4671</b>	
City State Zip Code Woodlands TX 77381	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction		
Name of Employer FAA Managers Association	Occupation Supervisor	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Robert M Clyburn

Mailing Address 2341 Dogwood Trail

City State Zip Code  
Germantown TN 38139

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4673

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 1208 Elwood Road

City State Zip Code  
Hammonton NJ 08037

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4679

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 154 Old Country Road

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4686

Amount of Each Receipt this Period  
350.00

Biweekly payroll deduction

<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: (check only one)	PAGE 13 / 39
	<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)  
**FAA Managers Association Inc. PAC**

Full Name (Last, First, Middle Initial) <b>A. Daniel R Cunningham</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address <b>4600 Alexander Valley Dr. Apt 202</b>		<b>Transaction ID: SA11A1.4694</b>	
City <b>Charlotte</b>	State <b>NC</b>	Zip Code <b>28270</b>	Amount of Each Receipt this Period 175.00
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction	
Name of Employer <b>FAA Managers Association</b>	Occupation <b>Supervisor</b>	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Jeffery A Cunnyngnam</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address <b>3268 Richele Ct.</b>		<b>Transaction ID: SA11A1.4695</b>	
City <b>Chino Hills</b>	State <b>CA</b>	Zip Code <b>91709</b>	Amount of Each Receipt this Period 98.00
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction	
Name of Employer <b>FAA Managers Association</b>	Occupation <b>Supervisor</b>	Aggregate Year-to-Date ▼ 266.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Warren D Davis</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address <b>1023 Drexelgate Lane</b>		<b>Transaction ID: SA11A1.4700</b>	
City <b>Upper Marlboro</b>	State <b>MD</b>	Zip Code <b>20774</b>	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction	
Name of Employer <b>FAA Managers Association</b>	Occupation <b>Supervisor</b>	Aggregate Year-to-Date ▼ 320.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	333.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 39
	<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)  
**FAA Managers Association Inc. PAC**

<b>A.</b> Full Name (Last, First, Middle Initial) Brian L Debord		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 12868 Levi Road		<b>Transaction ID:</b> SA11A1.4705
City State Zip Code Willis TX 77378	Amount of Each Receipt this Period 105.00	
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction	
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Robert F Dobbelaar		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 869 Flounder Ave.		<b>Transaction ID:</b> SA11A1.4709
City State Zip Code New Symrna Beach FL 32169	Amount of Each Receipt this Period 105.00	
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction	
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Russell D Emmert		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 601 Hudnall CT		<b>Transaction ID:</b> SA11A1.4721
City State Zip Code Keller TX 76248	Amount of Each Receipt this Period 105.00	
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction	
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	315.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Donald D Fedorowicz

Mailing Address 915 Welch Ave.

City State Zip Code  
Berthoud CO 80513

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4726

Amount of Each Receipt this Period  
210.00

Biweekly payroll deduction

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

Mailing Address 21122 East Mineral Drive

City State Zip Code  
Aurora CO 80016-1926

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4730

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

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

Mailing Address 3147 William St

City State Zip Code  
Wantagh NY 11793

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4740

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	525.00
<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 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Kari M Gonter

Mailing Address 23810 Green Haven Lane

City State Zip Code  
Ramona CA 92065

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4751

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 2517 18th Street SE

City State Zip Code  
Puyallup WA 98374

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4754

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

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

Mailing Address 20914 June Court

City State Zip Code  
Lakeville MN 55044

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4756

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	420.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Kevin D Haines

Mailing Address 2972 Robyn Dr.

City State Zip Code  
North Pole AK 99705

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4765

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 14525 Bluebird Trail NE

City State Zip Code  
Prior Lake MN 55372

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4772

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

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

Mailing Address 237 NW 89th Ave.

City State Zip Code  
Coral Springs FL 33071

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4780

Amount of Each Receipt this Period  
280.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	525.00
<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 18 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Judy A Holcomb

Mailing Address 304 E. Ponderosa Drive

City State Zip Code  
Tuttle OK 73089

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4783

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 6919 Augusta Pines Cove

City State Zip Code  
Spring TX 77389

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4794

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

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

Mailing Address 4509 Lake Charles Dr.

City State Zip Code  
Corpus Christi TX 78713

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4813

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>385.00</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 19 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Robert R Knight

Mailing Address 17056 Elsinore Dr.

City State Zip Code  
Jacksonville FL 32226

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.4818

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 23453 Woodview Drive

City State Zip Code  
N. Olmstead OH 44070

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.4826

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

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

Mailing Address 19938 War Admiral Road

City State Zip Code  
Eagle River AK 99577

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.4829

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>455.00</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 20 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Anthony D Manzione

Mailing Address 317 Ashbury Road

City Winchester State VA Zip Code 22602

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

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.4858

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

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

Mailing Address 2470 Flippen Rd.

City Stockbridge State GA Zip Code 30281-5162

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

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.4863

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Robert J McGrath, Jr.

Mailing Address PO Box 1173

City Fayetteville State GA Zip Code 30215

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

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.4870

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>455.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Daniel P Mullin

Mailing Address 16 Lincoln Circle

City State Zip Code  
Ivyland PA 18974

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

Name of Employer Occupation  
FAAMA Association Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.4887

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 2802 Smith Drive

City State Zip Code  
Endwell NY 13760

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.4889

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

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

Mailing Address PO Box 461930

City State Zip Code  
Aurora CO 80046

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.4894

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</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 22 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Deborah A Omowale

Mailing Address 2536 High Street

City State Zip Code  
Oakland CA 94601

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

Transaction ID: SA11A1.4897

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 22 Walnut Ave.

City State Zip Code  
Patchogue NY 11772

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

Transaction ID: SA11A1.4901

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

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

Mailing Address 9168 N Sacred Sky Pl.

City State Zip Code  
Marana AZ 85743

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

Transaction ID: SA11A1.4903

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>385.00</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 23 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Mark G Phipps

Mailing Address 13493 Falls Drive

City State Zip Code  
Broomfield CO 80020-5186

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4910

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 38719 Bear Creek

City State Zip Code  
Grafton OH 44044

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4916

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

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

Mailing Address PO Box 4145

City State Zip Code  
Leesburg VA 20177

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4917

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>385.00</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 24 / 39
	<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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mark O Ramp		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 20510 Ptarmigan Blvd.		Transaction ID: SA11A1.4925	
City Eagle River	State AK	Zip Code 99577	Amount of Each Receipt this Period 105.00
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction	
Name of Employer FAAMA	Occupation Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Elizabeth L Ray		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 724 Chehaw Rd.		Transaction ID: SA11A1.4926	
City Griffin	State GA	Zip Code 30223-6710	Amount of Each Receipt this Period 140.00
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction	
Name of Employer FAAMA	Occupation Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Billy K Reed		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 3020 Old Abilene Ct W		Transaction ID: SA11A1.4928	
City Mobie	State AL	Zip Code 36605	Amount of Each Receipt this Period 140.00
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction	
Name of Employer FAAMA	Occupation Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	385.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 39
	<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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Robert J Roane		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 7105 Overbrook Dr.		Transaction ID: SA11A1.4931	
City Niwot      State CO      Zip Code 80503	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction	
Name of Employer FAAMA      Occupation Supervisor	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Carey D Rolofson		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 13245 Timber Park Dr.		Transaction ID: SA11A1.4935	
City Platte City      State MT      Zip Code 64079	Amount of Each Receipt this Period 140.00		
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction	
Name of Employer FAAMA      Occupation Supervisor	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> John P Shisler		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 1554 Ramae Drive		Transaction ID: SA11A1.4951	
City Loveland      State CO      Zip Code 80537	Amount of Each Receipt this Period 175.00		
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly payroll deduction	
Name of Employer FAAMA      Occupation Supervisor	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	420.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
John D Sideris

Mailing Address 4202 Cabarrus Court East

City Greensboro State NC Zip Code 27407-7350

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.4953

Amount of Each Receipt this Period  
 105.00

Biweekly payroll deduction

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

Mailing Address 2221 Rule Ave.

City Maryland Heights State MT Zip Code 63043

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.4957

Amount of Each Receipt this Period  
 105.00

Biweekly payroll deduction

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

Mailing Address 17273 Pepperstock Lane

City Jeffersonton State VA Zip Code 22724

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.4963

Amount of Each Receipt this Period  
 105.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	315.00
<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 27 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
John A Taylor

Mailing Address 2404 SW 113 Terrace

City State Zip Code  
Oklahoma City OK 73170

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4982

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

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

Mailing Address 7609 Bertito Lane

City State Zip Code  
Springfield VA 22153-1615

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4990

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

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

Mailing Address 22 Westover Circle

City State Zip Code  
Mays Landing NJ 08330

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.4999

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>385.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 39
	<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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Ralph D Walters		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 3500 Cottonwood Circle		Transaction ID: SA11A1.5007
City State Zip Code Longmont CO 80504	Amount of Each Receipt this Period 280.00	
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction	
Name of Employer Occupation FAAMA Supervisor	Aggregate Year-to-Date ▼ 800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mark D Ward		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 507 Morgan Ct		Transaction ID: SA11A1.5008
City State Zip Code Hampton GA 30228	Amount of Each Receipt this Period 140.00	
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction	
Name of Employer Occupation FAAMA Supervisor	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Irving E Washington, Jr.		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 775 Gateway Dr SE		Transaction ID: SA11A1.5009
City State Zip Code Leesburg VA 20175	Amount of Each Receipt this Period 105.00	
FEC ID number of contributing federal political committee. C	Biweekly payroll deduction	
Name of Employer Occupation FAAMA Supervisor	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	525.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Terri Lynn Waterman

Mailing Address 8025 NW 124th St

City State Zip Code  
Oklahoma City OK 73142

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.5011

Amount of Each Receipt this Period  
350.00

Biweekly payroll deduction

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

Mailing Address 1511 Highland Lakes Dr.

City State Zip Code  
Keller TX 76248

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.5018

Amount of Each Receipt this Period  
210.00

Biweekly payroll deduction

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

Mailing Address 1710 Kingsway

City State Zip Code  
Oak Grove MT 64075

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.5020

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 39
	<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)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Kelley M Wilson

Mailing Address 39524 Denham Dr

City State Zip Code  
Palmdale CA 93551

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.5027

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

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

Mailing Address 1790 Evans Drive S

City State Zip Code  
Jacksonville Beach FL 32250

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.5034

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

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

Mailing Address 4921 Hartman Circle

City State Zip Code  
Anchorage AK 99507

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.5035

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>10367.00</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)

PAGE 31 / 39

<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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. BADGER FUND INC., THE</b>		<b>Transaction ID: SB23.5086</b> Date of Disbursement MM / DD / YYYY 08 / 13 / 2006
Mailing Address P O Box 373 SUITE 215		Amount of Each Disbursement this Period 2000.00
City Fairfax Station	State VA Zip Code 22039	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Leadership PAC	
State: VA District:		

Full Name (Last, First, Middle Initial) <b>B. BADGER FUND INC., THE</b>		<b>Transaction ID: SB23.5087</b> Date of Disbursement MM / DD / YYYY 09 / 23 / 2006
Mailing Address P O Box 373 SUITE 215		Amount of Each Disbursement this Period 2500.00
City Fairfax Station	State VA Zip Code 22039	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Leadership PAC	
State: VA District:		

Full Name (Last, First, Middle Initial) <b>C. BILL SHUSTER FOR CONGRESS</b>		<b>Transaction ID: SB23.5046</b> Date of Disbursement MM / DD / YYYY 08 / 13 / 2006
Mailing Address PO Box 27		Amount of Each Disbursement this Period 5000.00
City Hollidaysburg	State PA Zip Code 16648	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 09		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>9500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 39

<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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. BURNS VICTORY COMMITTEE</b>		Transaction ID: SB23.5084 Date of Disbursement 08 / 13 / 2006	
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Disbursement this Period 5000.00	
City ALEXANDRIA	State VA		Zip Code 22314
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ joint fund-qualified	State: MT District:	

Full Name (Last, First, Middle Initial) <b>B. CITIZENS FOR TOM PETRI</b>		Transaction ID: SB23.5058 Date of Disbursement 08 / 13 / 2006	
Mailing Address P.O. Box 270		Amount of Each Disbursement this Period 2000.00	
City Fond du Lac	State WI		Zip Code 54936
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: WI District: 06	

Full Name (Last, First, Middle Initial) <b>C. CITIZENS FOR TOM PETRI</b>		Transaction ID: SB23.5079 Date of Disbursement 09 / 23 / 2006	
Mailing Address P.O. Box 270		Amount of Each Disbursement this Period 2500.00	
City Fond du Lac	State WI		Zip Code 54936
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: WI District: 06	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9500.00
<b>TOTAL</b> This Period (last page this line number only) .....	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. DAVID DAVIS VICTORY FUND</b>		<b>Transaction ID: SB23.5077</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 6
Mailing Address 2016 NORTHWOOD DRIVE		Amount of Each Disbursement this Period 1000.00
City JOHNSON CITY State TN Zip Code 37601		
Purpose of Disbursement Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 01	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. FRIENDS OF JIM OBERSTAR</b>		<b>Transaction ID: SB23.5044</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 1017 8th St. NE		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JIM OBERSTAR</b>		<b>Transaction ID: SB23.5056</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 6
Mailing Address 1017 8th St. NE		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement Candidate Name FRIENDS OF JIM OBERSTAR	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. GRAVES FOR CONGRESS</b>		Transaction ID: SB23.5040 Date of Disbursement																					
Mailing Address 2345 Grand Suite 2400		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		1	3		2	0	0	6														
City Kansas City	State MO	Zip Code 64108	Amount of Each Disbursement this Period																				
Purpose of Disbursement		<table border="1"> <tr> <td>4000.00</td> </tr> </table>		4000.00																			
4000.00																							
Candidate Name		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: MO District: 06																							

Full Name (Last, First, Middle Initial) <b>B. GRAVES FOR CONGRESS</b>		Transaction ID: SB23.5071 Date of Disbursement																					
Mailing Address 2345 Grand Suite 2400		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	3		2	0	0	6														
City Kansas City	State MO	Zip Code 64108	Amount of Each Disbursement this Period																				
Purpose of Disbursement		<table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																			
1000.00																							
Candidate Name GRAVES FOR CONGRESS		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: MO District: 06																							

Full Name (Last, First, Middle Initial) <b>C. HEATHER WILSON FOR CONGRESS</b>		Transaction ID: SB23.5054 Date of Disbursement																					
Mailing Address P.O. BOX 14070 P.O. BOX 14070		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	3		2	0	0	6														
City ALBUQUERQUE	State NM	Zip Code 87191	Amount of Each Disbursement this Period																				
Purpose of Disbursement		<table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																			
1000.00																							
Candidate Name		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NM District: 01																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<table border="1"><tr><td>6000.00</td></tr></table>	6000.00
6000.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. HEATHER WILSON FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5074
Mailing Address P.O. BOX 14070 P.O. BOX 14070		Date of Disbursement MM / DD / YYYY 09 / 23 / 2006
City ALBUQUERQUE	State NM	Zip Code 87191
Purpose of Disbursement		Amount of Each Disbursement this Period 2000.00
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM	District: 01	

Full Name (Last, First, Middle Initial) <b>B. JUDGE JOHN CARTER FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.5069
Mailing Address P O BOX 6930		Date of Disbursement MM / DD / YYYY 09 / 02 / 2006
City ROUND ROCK	State TX	Zip Code 78683
Purpose of Disbursement		Amount of Each Disbursement this Period 2500.00
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 31	

Full Name (Last, First, Middle Initial) <b>C. KAY GRANGER CAMPAIGN FUND</b>		<b>Transaction ID:</b> SB23.5050
Mailing Address 715 Jones Street Suite 101		Date of Disbursement MM / DD / YYYY 08 / 13 / 2006
City Fort Worth	State TX	Zip Code 76102
Purpose of Disbursement		Amount of Each Disbursement this Period 2500.00
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 12	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. MIKE DEWINE FOR US SENATE</b>		<b>Transaction ID: SB23.5038</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 0 6
Mailing Address PO BOX 340188		Amount of Each Disbursement this Period 2500.00
City COLUMBUS State OH Zip Code 43234	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	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. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN</b>		<b>Transaction ID: SB23.5075</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 6
Mailing Address PO BOX 3662		Amount of Each Disbursement this Period 5000.00
City SEATTLE State WA Zip Code 98124	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. PEOPLE FOR PETE DOMENICI</b>		<b>Transaction ID: SB23.5060</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 6
Mailing Address POST OFFICE BOX 93656		Amount of Each Disbursement this Period 5000.00
City ALBUQUERQUE State NM Zip Code 87119	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. PORTER FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5081
Mailing Address PO Box 26087		Date of Disbursement 09 / 23 / 2006
City Las Vegas	State NV	Zip Code 89126
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: 03	

Full Name (Last, First, Middle Initial) <b>B. RAY MEIER FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.5072
Mailing Address PO Box 120		Date of Disbursement 09 / 23 / 2006
City Utica	State NY	Zip Code 13503
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 24	

Full Name (Last, First, Middle Initial) <b>C. REGULA FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.5064
Mailing Address 228 S. Washington St. Ste. 115		Date of Disbursement 09 / 02 / 2006
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement		Amount of Each Disbursement this Period 2500.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 16	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial)  
**A. ROBERT ADERHOLT FOR CONGRESS**

**Transaction ID: SB23.5062**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	6

Mailing Address P. O. Box 1158  
940 HWY 13

Amount of Each Disbursement this Period

2500.00
---------

City Haleyville State AL Zip Code 35565

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: AL District: 04

Full Name (Last, First, Middle Initial)  
**B. SWEENEY FOR CONGRESS INC**

**Transaction ID: SB23.5042**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	0	6

Mailing Address Post Office Box 1465

Amount of Each Disbursement this Period

5000.00
---------

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name  
SWEENEY FOR CONGRESS INC

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Full Name (Last, First, Middle Initial)  
**C. TEXANS FOR HENRY BONILLA**

**Transaction ID: SB23.5083**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	6

Mailing Address P.O. Box 17292

Amount of Each Disbursement this Period

2500.00
---------

City San Antonio State TX Zip Code 78217

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: TX District: 23

special election

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

10000.00
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**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

Full Name (Last, First, Middle Initial)  
**A. TIM JOHNSON FOR SOUTH DAKOTA INC**

Mailing Address PO BOX 1859

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: SD District: 00

Disbursement For: 2008  Primary  General  Other (specify) ▼

Transaction ID: SB23.5048

Date of Disbursement

M M /  D D /  Y Y Y Y  
0 8 / 1 3 / 2 0 0 6

Amount of Each Disbursement this Period

1500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<input type="text"/> 1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<input type="text"/> 70000.00