

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)
CITY STATE ZIPCODE

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 2009 through 12 31 2009

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 Christine Maiolo

Signature of Treasurer Electronically Filed by Christine Maiolo Date 01 29 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		96191.18
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	82363.05									
(c) Total Receipts (from Line 19)	64878.00	144545.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	147241.05	240736.18								
7. Total Disbursements (from Line 31)	65308.58	158803.71								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	81932.47	81932.47								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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**

FEC Form 3X (Rev. 06/2004)

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	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	63007.00	132192.50
(ii) Unitemized	1871.00	12352.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	64878.00	144545.00
(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)	64878.00	144545.00
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))	64878.00	144545.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	64878.00	144545.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	308.58	903.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	308.58	903.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	65000.00	157500.00
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	400.00
(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	400.00
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))..	65308.58	158803.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65308.58	158803.71

DETAILED SUMMARY PAGE
of Disbursements

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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)	64878.00	144545.00
34. Total Contribution Refunds (from Line 28(d))	0.00	400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64878.00	144145.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	308.58	903.71
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	308.58	903.71

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 155
(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

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)
Hannah Berkowitz

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Executive, Senior Associate Gene

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt 09 / 15 / 2009

Transaction ID: 20090914-82-13-31

Amount of Each Receipt this Period 125.00

B.

Full Name (Last, First, Middle Initial)
Hannah Berkowitz

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Executive, Senior Associate Gene

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-81-12-31

Amount of Each Receipt this Period 125.00

C.

Full Name (Last, First, Middle Initial)
Hannah Berkowitz

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Executive, Senior Associate Gene

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt 11 / 15 / 2009

Transaction ID: 20091111-78-11-45

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► 375.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 155
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Hannah Berkowitz	Date of Receipt MM / DD / YYYY 12 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091211-78-11-15
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation Group Executive, Senior Associate General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 625.00	

B.	Full Name (Last, First, Middle Initial) Angela Borgsmiller	Date of Receipt MM / DD / YYYY 11 / 15 / 2009
	Mailing Address 2200 Mastercard Boulevard	Transaction ID: 20091111-30-11-45
	City O Fallon State MO Zip Code 63368-7263	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation Consultant, Business Support Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 240.00	

C.	Full Name (Last, First, Middle Initial) Angela Borgsmiller	Date of Receipt MM / DD / YYYY 12 / 15 / 2009
	Mailing Address 2200 Mastercard Boulevard	Transaction ID: 20091211-30-11-15
	City O Fallon State MO Zip Code 63368-7263	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation Consultant, Business Support Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	165.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 9 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Gregory Box
Mailing Address 2200 Mastercard Boulevard
City O Fallon State MO Zip Code 63368-7263
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 ▼ 744.00
Date of Receipt 07 / 15 / 2009
Transaction ID: 20090713-6-12-0
Amount of Each Receipt this Period 62.00

B. Full Name (Last, First, Middle Initial)
Gregory Box
Mailing Address 2200 Mastercard Boulevard
City O Fallon State MO Zip Code 63368-7263
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 ▼ 744.00
Date of Receipt 08 / 15 / 2009
Transaction ID: 20090812-6-12-48
Amount of Each Receipt this Period 62.00

C. Full Name (Last, First, Middle Initial)
Gregory Box
Mailing Address 2200 Mastercard Boulevard
City O Fallon State MO Zip Code 63368-7263
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 ▼ 744.00
Date of Receipt 09 / 15 / 2009
Transaction ID: 20090914-6-13-31
Amount of Each Receipt this Period 62.00

SUBTOTAL of Receipts This Page (optional) ► 186.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Gregory Box

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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 ▼ 744.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-6-12-31

Amount of Each Receipt this Period
62.00

B.

Full Name (Last, First, Middle Initial)
Gregory Box

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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 ▼ 744.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 9

Transaction ID: 20091111-6-11-45

Amount of Each Receipt this Period
62.00

C.

Full Name (Last, First, Middle Initial)
Gregory Box

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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 ▼ 744.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-6-11-15

Amount of Each Receipt this Period
62.00

SUBTOTAL of Receipts This Page (optional) ► **186.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 155
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Jim Carrington	Date of Receipt MM / DD / YYYY 07 / 28 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 78B2435DE91947DD809
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 291.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation Global Product Group Executive, Global Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3201.00	

B.	Full Name (Last, First, Middle Initial) Jim Carrington	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 9A4BFB7522EC65E36A8
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 291.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation Global Product Group Executive, Global Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3201.00	

C.	Full Name (Last, First, Middle Initial) Jim Carrington	Date of Receipt MM / DD / YYYY 09 / 28 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 84F7706DEF495F9C3A9
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 291.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation Global Product Group Executive, Global Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3201.00	

SUBTOTAL of Receipts This Page (optional)	873.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 155
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Jim Carrington		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Purchase	NY	10577-2405
	FEC ID number of contributing federal political committee. C		Transaction ID: 705500CF399004D93B4
Name of Employer MasterCard		Occupation Global Product Group Executive, Global	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="3201.00"/>	<input type="text" value="291.00"/>

B.	Full Name (Last, First, Middle Initial) Jim Carrington		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Purchase	NY	10577-2405
	FEC ID number of contributing federal political committee. C		Transaction ID: 8DA001DD507D7E5C5AE
Name of Employer MasterCard		Occupation Global Product Group Executive, Global	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="3201.00"/>	<input type="text" value="291.00"/>

C.	Full Name (Last, First, Middle Initial) Jim Carrington		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Purchase	NY	10577-2405
	FEC ID number of contributing federal political committee. C		Transaction ID: 372C0578C9BA883C0A7
Name of Employer MasterCard		Occupation Global Product Group Executive, Global	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="3201.00"/>	<input type="text" value="291.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="873.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 155

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Joe Casale

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

FEC ID number of contributing federal political committee. C

Name of Employer MasterCard Occupation Business Leader, Product Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 15 / 2009

Transaction ID: 20090713-79-12-0

Amount of Each Receipt this Period 75.00

B.

Full Name (Last, First, Middle Initial)
Joe Casale

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

FEC ID number of contributing federal political committee. C

Name of Employer MasterCard Occupation Business Leader, Product Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 15 / 2009

Transaction ID: 20090812-79-12-48

Amount of Each Receipt this Period 75.00

C.

Full Name (Last, First, Middle Initial)
Joe Casale

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

FEC ID number of contributing federal political committee. C

Name of Employer MasterCard Occupation Business Leader, Product Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2009

Transaction ID: 20090914-79-13-31

Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) 225.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 155						
	(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

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

A.	Full Name (Last, First, Middle Initial) Joe Casale		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 2000 Purchase Street		Transaction ID: 20091013-78-12-31		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer MasterCard		Occupation Business Leader, Product Management		

Aggregate Year-to-Date ▼
900.00

B.	Full Name (Last, First, Middle Initial) Joe Casale		Date of Receipt MM / DD / YYYY 11 / 15 / 2009		
	Mailing Address 2000 Purchase Street		Transaction ID: 20091111-75-11-45		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer MasterCard		Occupation Business Leader, Product Management		

Aggregate Year-to-Date ▼
900.00

C.	Full Name (Last, First, Middle Initial) Joe Casale		Date of Receipt MM / DD / YYYY 12 / 15 / 2009		
	Mailing Address 2000 Purchase Street		Transaction ID: 20091211-75-11-15		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer MasterCard		Occupation Business Leader, Product Management		

Aggregate Year-to-Date ▼
900.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Andrew Cheskis
Mailing Address 100 Manhattanville Road
City State Zip Code
Purchase NY 10577-2134
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation SVP/General Auditor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3150.00
Date of Receipt 07 / 15 / 2009
Transaction ID: 20090713-19-12-0
Amount of Each Receipt this Period 350.00

B. Full Name (Last, First, Middle Initial)
Andrew Cheskis
Mailing Address 100 Manhattanville Road
City State Zip Code
Purchase NY 10577-2134
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation SVP/General Auditor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3150.00
Date of Receipt 08 / 15 / 2009
Transaction ID: 20090812-19-12-48
Amount of Each Receipt this Period 350.00

C. Full Name (Last, First, Middle Initial)
Andrew Cheskis
Mailing Address 100 Manhattanville Road
City State Zip Code
Purchase NY 10577-2134
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation SVP/General Auditor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3150.00
Date of Receipt 09 / 15 / 2009
Transaction ID: 20090914-19-13-31
Amount of Each Receipt this Period 350.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 155
(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
							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) Andrew Cheskis		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 100 Manhattanville Road		Transaction ID: 20091013-19-12-31
City	State	Zip Code
Purchase	NY	10577-2134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer MasterCard	Occupation SVP/General Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	

B.

Full Name (Last, First, Middle Initial) Andrew Cheskis		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 100 Manhattanville Road		Transaction ID: 20091111-18-11-45
City	State	Zip Code
Purchase	NY	10577-2134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer MasterCard	Occupation SVP/General Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	

C.

Full Name (Last, First, Middle Initial) Andrew Cheskis		Date of Receipt MM / DD / YYYY 12 / 15 / 2009
Mailing Address 100 Manhattanville Road		Transaction ID: 20091211-18-11-15
City	State	Zip Code
Purchase	NY	10577-2134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer MasterCard	Occupation SVP/General Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 155

(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

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)
Michael Cyr

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Team Leader-Member Relation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	9	

Transaction ID: 20091111-40-11-45

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Michael Cyr

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Team Leader-Member Relation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	9	

Transaction ID: 20091211-40-11-15

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Diane Dann

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Counsel Sr

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	5	/	2	0	9	

Transaction ID: 20090713-25-12-0

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

90.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Diane Dann
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Counsel Sr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 08 / 15 / 2009
Transaction ID: 20090812-25-12-48
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Diane Dann
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Counsel Sr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 09 / 15 / 2009
Transaction ID: 20090914-25-13-31
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Diane Dann
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Counsel Sr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-25-12-31
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 19 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Diane Dann
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Counsel Sr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 11 / 15 / 2009
Transaction ID: 20091111-24-11-45
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Diane Dann
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Counsel Sr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 12 / 15 / 2009
Transaction ID: 20091211-24-11-15
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Heidi Davidson
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Director State Govt Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3850.00
Date of Receipt 07 / 15 / 2009
Transaction ID: 20090713-37-12-0
Amount of Each Receipt this Period 350.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 20 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Heidi Davidson
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Director State Govt Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3850.00
Date of Receipt 08 / 15 / 2009
Transaction ID: 20090812-37-12-48
Amount of Each Receipt this Period 350.00

B. Full Name (Last, First, Middle Initial)
Heidi Davidson
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Director State Govt Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3850.00
Date of Receipt 09 / 15 / 2009
Transaction ID: 20090914-37-13-31
Amount of Each Receipt this Period 350.00

C. Full Name (Last, First, Middle Initial)
Heidi Davidson
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Director State Govt Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3850.00
Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-37-12-31
Amount of Each Receipt this Period 350.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Heidi Davidson

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Director State Govt Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3850.00

Date of Receipt 11 / 15 / 2009

Transaction ID: 20091111-36-11-45

Amount of Each Receipt this Period 350.00

B.

Full Name (Last, First, Middle Initial)
Heidi Davidson

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Director State Govt Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3850.00

Date of Receipt 12 / 15 / 2009

Transaction ID: 20091211-36-11-15

Amount of Each Receipt this Period 350.00

C.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation SVP/Asst. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 15 / 2009

Transaction ID: 20090713-24-12-0

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► **825.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard SVP/Asst. General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: 20090812-24-12-48

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard SVP/Asst. General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 9

Transaction ID: 20090914-24-13-31

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
Colm Dobbyn

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard SVP/Asst. General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-24-12-31

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Colm Dobbyn
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation SVP/Asst. General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt 11 / 15 / 2009
Transaction ID: 20091111-23-11-45
Amount of Each Receipt this Period 125.00

B. Full Name (Last, First, Middle Initial)
Colm Dobbyn
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation SVP/Asst. General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt 12 / 15 / 2009
Transaction ID: 20091211-23-11-15
Amount of Each Receipt this Period 125.00

C. Full Name (Last, First, Middle Initial)
Nadia Dombrowski
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Counsel Sr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt 07 / 15 / 2009
Transaction ID: 20090713-67-12-0
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 280.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 155

(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

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)
Nadia Dombrowski

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Counsel Sr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2009

Transaction ID: 20090812-67-12-48

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)
Nadia Dombrowski

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Counsel Sr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-67-13-31

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
Nadia Dombrowski

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Counsel Sr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-66-12-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Nadia Dombrowski

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 11 / 15 / 2009
Transaction ID: 20091111-64-11-45
 Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Nadia Dombrowski

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-64-11-15
 Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Patrick Dwyer

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Consumer & Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt: 08 / 15 / 2009
Transaction ID: 20090812-60-12-48
 Amount of Each Receipt this Period: 26.00

SUBTOTAL of Receipts This Page (optional) ► 86.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 155

(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

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)
Patrick Dwyer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Consumer & Public Affairs

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-60-13-31

Amount of Each Receipt this Period

26.00

B.

Full Name (Last, First, Middle Initial)
Patrick Dwyer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Consumer & Public Affairs

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-59-12-31

Amount of Each Receipt this Period

26.00

C.

Full Name (Last, First, Middle Initial)
Patrick Dwyer

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Consumer & Public Affairs

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2009

Transaction ID: 20091111-58-11-45

Amount of Each Receipt this Period

26.00

SUBTOTAL of Receipts This Page (optional)

78.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 155
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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) Patrick Dwyer		Date of Receipt MM / DD / YYYY 12 / 15 / 2009		
	Mailing Address 2000 Purchase Street		Transaction ID: 20091211-58-11-15		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 26.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation VP/Consumer & Public Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.00			

B.	Full Name (Last, First, Middle Initial) Michael Ellison		Date of Receipt MM / DD / YYYY 07 / 15 / 2009		
	Mailing Address 2000 Purchase Street		Transaction ID: 20090713-51-12-0		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 1250.00			

C.	Full Name (Last, First, Middle Initial) Michael Ellison		Date of Receipt MM / DD / YYYY 08 / 15 / 2009		
	Mailing Address 2000 Purchase Street		Transaction ID: 20090812-51-12-48		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 1250.00			

SUBTOTAL of Receipts This Page (optional)	226.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 28 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Michael Ellison
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2405
 Date of Receipt 09 / 15 / 2009
Transaction ID: 20090914-51-13-31
 Amount of Each Receipt this Period 100.00
 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 ▼ 1250.00

B. Full Name (Last, First, Middle Initial)
Michael Ellison
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2405
 Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-50-12-31
 Amount of Each Receipt this Period 100.00
 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 ▼ 1250.00

C. Full Name (Last, First, Middle Initial)
Michael Ellison
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2405
 Date of Receipt 11 / 15 / 2009
Transaction ID: 20091111-49-11-45
 Amount of Each Receipt this Period 100.00
 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 ▼ 1250.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-49-11-15
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Lawrence Flanagan

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Marketing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt: 07 / 15 / 2009
Transaction ID: 20090713-28-12-0
 Amount of Each Receipt this Period: 416.00

C. Full Name (Last, First, Middle Initial)
Lawrence Flanagan

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Marketing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt: 08 / 15 / 2009
Transaction ID: 20090812-28-12-48
 Amount of Each Receipt this Period: 416.00

SUBTOTAL of Receipts This Page (optional) ► 932.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 155
	<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

A.	Full Name (Last, First, Middle Initial) Lawrence Flanagan		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090914-28-13-31
Name of Employer MasterCard		Occupation Chief Marking Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="416.00"/>
		<input type="text" value="4992.00"/>	

B.	Full Name (Last, First, Middle Initial) Lawrence Flanagan		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-28-12-31
Name of Employer MasterCard		Occupation Chief Marking Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="416.00"/>
		<input type="text" value="4992.00"/>	

C.	Full Name (Last, First, Middle Initial) Lawrence Flanagan		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Purchase	NY	10577-2509
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091111-27-11-45
Name of Employer MasterCard		Occupation Chief Marking Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="416.00"/>
		<input type="text" value="4992.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1248.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 155
(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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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)
Lawrence Flanagan

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Marking Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 12 / 15 / 2009

Transaction ID: 20091211-27-11-15

Amount of Each Receipt this Period 416.00

B.

Full Name (Last, First, Middle Initial)
Tucker Foote

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 21 / 2009

Transaction ID: 2B24056E733A29A01C2

Amount of Each Receipt this Period 125.00

C.

Full Name (Last, First, Middle Initial)
Tucker Foote

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 21 / 2009

Transaction ID: CDD2D7D2937699EB248

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ▶ 666.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 09 / 21 / 2009
Transaction ID: 6E64B6A579A7395B27E
 Amount of Each Receipt this Period: 125.00

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

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 10 / 21 / 2009
Transaction ID: 7ABC8287F23EC0A8FBB
 Amount of Each Receipt this Period: 125.00

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

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 11 / 21 / 2009
Transaction ID: 074C20A356CAFCAB30D
 Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► 375.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 155
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Tucker Foote	Date of Receipt MM / DD / YYYY 12 / 21 / 2009
	Mailing Address 1401 Eye Street Northwest Suite 2	Transaction ID: 64F57BDC304884F7F29
	City State Zip Code Washington DC 20005-2225	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer MasterCard	Occupation Business Leader, Public Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

B.	Full Name (Last, First, Middle Initial) Gareth Forsey	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20090713-30-12-0
	City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
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 ▼ 4992.00	

C.	Full Name (Last, First, Middle Initial) Gareth Forsey	Date of Receipt MM / DD / YYYY 08 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20090812-30-12-48
	City State Zip Code Purchase NY 10577-2509	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
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 ▼ 4992.00	

SUBTOTAL of Receipts This Page (optional)	957.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Gareth Forsey		Date of Receipt MM / DD / YYYY 09 / 15 / 2009
Mailing Address 2000 Purchase Street		Transaction ID: 20090914-30-13-31
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4992.00	

B.

Full Name (Last, First, Middle Initial) Gareth Forsey		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 2000 Purchase Street		Transaction ID: 20091013-30-12-31
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4992.00	

C.

Full Name (Last, First, Middle Initial) Gareth Forsey		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 2000 Purchase Street		Transaction ID: 20091111-29-11-45
City Purchase	State NY	Zip Code 10577-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4992.00	

SUBTOTAL of Receipts This Page (optional)	1248.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 155

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Gareth Forsey

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 Occupation
MasterCard SVP/Cust Business Plan/Analys

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-29-11-15

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)
Raye Forsey

Mailing Address 55 Dirksen Dr

City State Zip Code
Wilton CT 06897-4609

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

Name of Employer Occupation
Spouse of Employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 9 / 2 0 0 9

Transaction ID: 5E7A8F5DBD1BBBBF3D75

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)
Raye Forsey

Mailing Address 55 Dirksen Dr

City State Zip Code
Wilton CT 06897-4609

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

Name of Employer Occupation
Spouse of Employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 9 / 2 0 0 9

Transaction ID: 7BAAD708EF1BF81CF6A

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional) ▶

1248.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Raye Forsey
Mailing Address 55 Dirksen Dr
City Wilton State CT Zip Code 06897-4609
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Spouse of Employee
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00
Date of Receipt 09 / 19 / 2009
Transaction ID: 72AEA41279798C2B59
Amount of Each Receipt this Period 416.00

B. Full Name (Last, First, Middle Initial)
Raye Forsey
Mailing Address 55 Dirksen Dr
City Wilton State CT Zip Code 06897-4609
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Spouse of Employee
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00
Date of Receipt 10 / 19 / 2009
Transaction ID: F00C08497CDB8F84443
Amount of Each Receipt this Period 416.00

C. Full Name (Last, First, Middle Initial)
Raye Forsey
Mailing Address 55 Dirksen Dr
City Wilton State CT Zip Code 06897-4609
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Spouse of Employee
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00
Date of Receipt 11 / 19 / 2009
Transaction ID: 4F633BCD1A9A621911E
Amount of Each Receipt this Period 416.00

SUBTOTAL of Receipts This Page (optional) ► 1248.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 37 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Raye Forsey
Mailing Address 55 Dirksen Dr
City Wilton State CT Zip Code 06897-4609
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Spouse of Employee
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00
Date of Receipt 12 / 19 / 2009
Transaction ID: E8D5F779473E65A9CE2
Amount of Each Receipt this Period 416.00

B. Full Name (Last, First, Middle Initial)
John Gallagher
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation VP/Financial Analysis
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00
Date of Receipt 07 / 15 / 2009
Transaction ID: 20090713-55-12-0
Amount of Each Receipt this Period 124.00

C. Full Name (Last, First, Middle Initial)
John Gallagher
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation VP/Financial Analysis
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00
Date of Receipt 08 / 15 / 2009
Transaction ID: 20090812-55-12-48
Amount of Each Receipt this Period 124.00

SUBTOTAL of Receipts This Page (optional) ▶ 664.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 155
(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

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)
John Gallagher

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 09 / 15 / 2009

Transaction ID: 20090914-55-13-31

Amount of Each Receipt this Period: 124.00

B.

Full Name (Last, First, Middle Initial)
John Gallagher

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 10 / 15 / 2009

Transaction ID: 20091013-54-12-31

Amount of Each Receipt this Period: 124.00

C.

Full Name (Last, First, Middle Initial)
John Gallagher

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 11 / 15 / 2009

Transaction ID: 20091111-53-11-45

Amount of Each Receipt this Period: 124.00

SUBTOTAL of Receipts This Page (optional) ► 372.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
John Gallagher

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt 12 / 15 / 2009

Transaction ID: 20091211-53-11-15

Amount of Each Receipt this Period 124.00

B.

Full Name (Last, First, Middle Initial)
Gene Galliani

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Leader, Systems Programming

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 15 / 2009

Transaction ID: 20090713-50-12-0

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Gene Galliani

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Leader, Systems Programming

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 15 / 2009

Transaction ID: 20090812-50-12-48

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 224.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Gene Galliani

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Leader, Systems Programming

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-50-13-31

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Gene Galliani

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Leader, Systems Programming

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

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-49-12-31

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Gene Galliani

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Leader, Systems Programming

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

Date of Receipt

M M / D D / Y Y Y Y
11 / 15 / 2009

Transaction ID: 20091111-48-11-45

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 155
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Gene Galliani		Date of Receipt
	Mailing Address 2200 Mastercard Boulevard		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 1 5 / 2 0 0 9
	City	State	Zip Code
	O Fallon	MO	63368-7263
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091211-48-11-15
Name of Employer MasterCard		Occupation Leader, Systems Programming	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 600.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) Bart Goldstein		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 9 / 1 5 / 2 0 0 9
	City	State	Zip Code
	Purchase	NY	10577-2405
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090914-72-13-31
Name of Employer MasterCard		Occupation Group Head, Sec and Governance	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Bart Goldstein		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9
	City	State	Zip Code
	Purchase	NY	10577-2405
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-71-12-31
Name of Employer MasterCard		Occupation Group Head, Sec and Governance	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 100.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Bart Goldstein

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Head, Sec and Governance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 15 / 2009

Transaction ID: 20091111-69-11-45

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Bart Goldstein

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Head, Sec and Governance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2009

Transaction ID: 20091211-69-11-15

Amount of Each Receipt this Period 25.00

C.

Full Name (Last, First, Middle Initial)
Dora Hanft

Mailing Address 670 W End Ave

City New York State NY Zip Code 10025-7313

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

Name of Employer Occupation Spouse of Employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt 07 / 21 / 2009

Transaction ID: D4BF4B82B8E629802F2

Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ► **258.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Dora Hanft

Mailing Address 670 W End Ave

City State Zip Code
New York NY 10025-7313

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

Name of Employer Occupation
Spouse of Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2009

Transaction ID: 7C1CAAC72B9F460FF84

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Dora Hanft

Mailing Address 670 W End Ave

City State Zip Code
New York NY 10025-7313

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

Name of Employer Occupation
Spouse of Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2009

Transaction ID: 567C7B0467E31BF3EE9

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
Dora Hanft

Mailing Address 670 W End Ave

City State Zip Code
New York NY 10025-7313

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

Name of Employer Occupation
Spouse of Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2009

Transaction ID: EFC0EDE59EC7C1B1C4E

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► 624.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Dora Hanft

Mailing Address 670 W End Ave

City State Zip Code
New York NY 10025-7313

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

Name of Employer Occupation
Spouse of Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

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

Transaction ID: 00A4A915699E366BF5B

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Dora Hanft

Mailing Address 670 W End Ave

City State Zip Code
New York NY 10025-7313

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

Name of Employer Occupation
Spouse of Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

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

Transaction ID: 8DCE8F29115365F98C0

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
Noah Hanft

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-16-12-0

Amount of Each Receipt this Period
416.00

SUBTOTAL of Receipts This Page (optional) ► **832.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 155

(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Noah Hanft	Date of Receipt MM / DD / YYYY 08 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20090812-16-12-48
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
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 ▼ 4992.00	
B.	Full Name (Last, First, Middle Initial) Noah Hanft	Date of Receipt MM / DD / YYYY 09 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20090914-16-13-31
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
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 ▼ 4992.00	
C.	Full Name (Last, First, Middle Initial) Noah Hanft	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091013-16-12-31
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
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 ▼ 4992.00	

SUBTOTAL of Receipts This Page (optional) ▶

1248.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Noah Hanft		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 2000 Purchase Street		Transaction ID: 20091111-15-11-45
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4992.00	

B.

Full Name (Last, First, Middle Initial) Noah Hanft		Date of Receipt MM / DD / YYYY 12 / 15 / 2009
Mailing Address 2000 Purchase Street		Transaction ID: 20091211-15-11-15
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4992.00	

C.

Full Name (Last, First, Middle Initial) Robert Hariegel		Date of Receipt MM / DD / YYYY 07 / 15 / 2009
Mailing Address 2000 Purchase Street		Transaction ID: 20090713-32-12-0
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MasterCard	Occupation Leader, Strategic Sourcing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	882.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 155
	<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 Hariegel		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 15 / 2009
	City	State	Zip Code
	Purchase	NY	10577-2405
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090812-32-12-48
Name of Employer MasterCard		Occupation Leader, Strategic Sourcing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) Robert Hariegel		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2009
	City	State	Zip Code
	Purchase	NY	10577-2405
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090914-32-13-31
Name of Employer MasterCard		Occupation Leader, Strategic Sourcing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) Robert Hariegel		Date of Receipt
	Mailing Address 2000 Purchase Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 15 / 2009
	City	State	Zip Code
	Purchase	NY	10577-2405
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-32-12-31
Name of Employer MasterCard		Occupation Leader, Strategic Sourcing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 155
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Robert Hariegel

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Leader, Strategic Sourcing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 15 / 2009
Transaction ID: 20091111-31-11-45
 Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Robert Hariegel

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Leader, Strategic Sourcing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2009
Transaction ID: 20091211-31-11-15
 Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Ken Hayes

Mailing Address 8755 West Higgins Road

City Chicago State IL Zip Code 60631-2708

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

Name of Employer MasterCard Occupation VP/Member Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 15 / 2009
Transaction ID: 20091111-60-11-45
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 120.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 155
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
Ken Hayes

Mailing Address 8755 West Higgins Road

City Chicago State IL Zip Code 60631-2708

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

Name of Employer MasterCard Occupation VP/Member Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2009

Transaction ID: 20091211-60-11-15

Amount of Each Receipt this Period 20.00

B.

Full Name (Last, First, Middle Initial)
Justin Howe

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Finance Leader, Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1870.00

Date of Receipt 07 / 15 / 2009

Transaction ID: 20090713-59-12-0

Amount of Each Receipt this Period 167.00

C.

Full Name (Last, First, Middle Initial)
Justin Howe

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Finance Leader, Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1870.00

Date of Receipt 08 / 15 / 2009

Transaction ID: 20090812-59-12-48

Amount of Each Receipt this Period 167.00

SUBTOTAL of Receipts This Page (optional) ► 354.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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) Justin Howe		Date of Receipt MM / DD / YYYY 09 / 15 / 2009	
Mailing Address 2000 Purchase Street		Transaction ID: 20090914-59-13-31	
City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 167.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation Finance Leader, Financial Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1870.00		

B.

Full Name (Last, First, Middle Initial) Justin Howe		Date of Receipt MM / DD / YYYY 10 / 15 / 2009	
Mailing Address 2000 Purchase Street		Transaction ID: 20091013-58-12-31	
City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 167.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation Finance Leader, Financial Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1870.00		

C.

Full Name (Last, First, Middle Initial) Justin Howe		Date of Receipt MM / DD / YYYY 11 / 15 / 2009	
Mailing Address 2000 Purchase Street		Transaction ID: 20091111-57-11-45	
City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 167.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation Finance Leader, Financial Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1870.00		

SUBTOTAL of Receipts This Page (optional)	501.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 155
	<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

A.	Full Name (Last, First, Middle Initial) Justin Howe	Date of Receipt MM / DD / YYYY 12 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091211-57-11-15
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 167.00
	FEC ID number of contributing federal political committee. C	
Name of Employer MasterCard Occupation Finance Leader, Financial Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1870.00	

B.	Full Name (Last, First, Middle Initial) Greg Howes	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address PO Box 25000	Transaction ID: 20090713-71-12-0
	City Raleigh State NC Zip Code 27640-0100	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer MasterCard Occupation Global Solutions Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

C.	Full Name (Last, First, Middle Initial) Greg Howes	Date of Receipt MM / DD / YYYY 08 / 15 / 2009
	Mailing Address PO Box 25000	Transaction ID: 20090812-71-12-48
	City Raleigh State NC Zip Code 27640-0100	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer MasterCard Occupation Global Solutions Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	367.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 52 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Greg Howes
Mailing Address PO Box 25000
City Raleigh State NC Zip Code 27640-0100
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Global Solutions Leader
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 09 / 15 / 2009
Transaction ID: 20090914-71-13-31
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Greg Howes
Mailing Address PO Box 25000
City Raleigh State NC Zip Code 27640-0100
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Global Solutions Leader
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-70-12-31
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Greg Howes
Mailing Address PO Box 25000
City Raleigh State NC Zip Code 27640-0100
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Global Solutions Leader
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 11 / 15 / 2009
Transaction ID: 20091111-68-11-45
Amount of Each Receipt this Period 100.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 155

(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

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)

Greg Howes

Mailing Address PO Box 25000

City State Zip Code
Raleigh NC 27640-0100

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

Name of Employer Occupation
MasterCard Global Solutions Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-68-11-15

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Engineering Svcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-33-12-0

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Engineering Svcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: 20090812-33-12-48

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

348.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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) James Hull		Date of Receipt MM / DD / YYYY 09 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20090914-33-13-31
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation Group Head, Engineering Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

B.

Full Name (Last, First, Middle Initial) James Hull		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091013-33-12-31
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation Group Head, Engineering Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

C.

Full Name (Last, First, Middle Initial) James Hull		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091111-32-11-45
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation Group Head, Engineering Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

SUBTOTAL of Receipts This Page (optional)	▶	372.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Engineering Svcs

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-32-11-15

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)
Dale Jenkins

Mailing Address 11907 Butternut Lane

City State Zip Code
Farragut TN 37934-4657

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

Name of Employer Occupation
MasterCard Consultant, Business Analysis

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

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 9

Transaction ID: 20090914-68-13-31

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Dale Jenkins

Mailing Address 11907 Butternut Lane

City State Zip Code
Farragut TN 37934-4657

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

Name of Employer Occupation
MasterCard Consultant, Business Analysis

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-67-12-31

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

174.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Dale Jenkins

Mailing Address 11907 Butternut Lane

City State Zip Code
Farragut TN 37934-4657

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

Name of Employer MasterCard Occupation Consultant, Business Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 9

Transaction ID: 20091111-65-11-45

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Dale Jenkins

Mailing Address 11907 Butternut Lane

City State Zip Code
Farragut TN 37934-4657

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

Name of Employer MasterCard Occupation Consultant, Business Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-65-11-15

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Enhancement Stratg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-3-12-0

Amount of Each Receipt this Period
290.00

SUBTOTAL of Receipts This Page (optional) ► **340.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Enhancement Stratg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2009

Transaction ID: 20090812-3-12-48

Amount of Each Receipt this Period
290.00

B.

Full Name (Last, First, Middle Initial)
Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Enhancement Stratg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 20090914-3-13-31

Amount of Each Receipt this Period
290.00

C.

Full Name (Last, First, Middle Initial)
Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Enhancement Stratg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-3-12-31

Amount of Each Receipt this Period
290.00

SUBTOTAL of Receipts This Page (optional) ▶ **870.00**

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

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

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

FOR LINE NUMBER: PAGE 58 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Joan Kelly
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 5 / 2 0 0 9
Transaction ID: 20091111-3-11-45
 Amount of Each Receipt this Period
 290.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MasterCard SVP/Systems Enhancement Stratg
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

B. Full Name (Last, First, Middle Initial)
Joan Kelly
 Mailing Address 2200 Mastercard Boulevard
 City State Zip Code
 O Fallon MO 63368-7263
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 5 / 2 0 0 9
Transaction ID: 20091211-3-11-15
 Amount of Each Receipt this Period
 290.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MasterCard SVP/Systems Enhancement Stratg
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

C. Full Name (Last, First, Middle Initial)
Mike Kelly
 Mailing Address 1401 Eye Street Northwest Suite 2
 City State Zip Code
 Washington DC 20005-2225
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 1 5 / 2 0 0 9
Transaction ID: 20090713-61-12-0
 Amount of Each Receipt this Period
 35.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MasterCard VP/NA Business Development
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

SUBTOTAL of Receipts This Page (optional) ► 615.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 155
(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

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)
Mike Kelly

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation VP/NA Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 15 / 2009

Transaction ID: 20090812-61-12-48

Amount of Each Receipt this Period 35.00

B.

Full Name (Last, First, Middle Initial)
Mike Kelly

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation VP/NA Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2009

Transaction ID: 20090914-61-13-31

Amount of Each Receipt this Period 35.00

C.

Full Name (Last, First, Middle Initial)
Mike Kelly

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation VP/NA Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-60-12-31

Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) ► **105.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 155

(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

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)
Claire Le Gal

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 Occupation
MasterCard Business Leader, Fraud Management

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

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2009

Transaction ID: 20090713-27-12-0

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Claire Le Gal

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 Occupation
MasterCard Business Leader, Fraud Management

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

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2009

Transaction ID: 20090812-27-12-48

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Claire Le Gal

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 Occupation
MasterCard Business Leader, Fraud Management

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-27-13-31

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Claire Le Gal

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Business Leader, Fraud Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-27-12-31
 Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
Claire Le Gal

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Business Leader, Fraud Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 11 / 15 / 2009
Transaction ID: 20091111-26-11-45
 Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
Claire Le Gal

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Business Leader, Fraud Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-26-11-15
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Member Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1740.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2009

Transaction ID: 20090713-2-12-0

Amount of Each Receipt this Period
145.00

B.

Full Name (Last, First, Middle Initial)
Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Member Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1740.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2009

Transaction ID: 20090812-2-12-48

Amount of Each Receipt this Period
145.00

C.

Full Name (Last, First, Middle Initial)
Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Member Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1740.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 20090914-2-13-31

Amount of Each Receipt this Period
145.00

SUBTOTAL of Receipts This Page (optional) ► **435.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Member Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1740.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-2-12-31

Amount of Each Receipt this Period
145.00

B.

Full Name (Last, First, Middle Initial)
Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Member Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1740.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 9

Transaction ID: 20091111-2-11-45

Amount of Each Receipt this Period
145.00

C.

Full Name (Last, First, Middle Initial)
Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Member Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1740.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-2-11-15

Amount of Each Receipt this Period
145.00

SUBTOTAL of Receipts This Page (optional) ► **435.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 155

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Randall Leonard

Mailing Address 5555 Winghaven Boulevard

City State Zip Code
O Fallon MO 63368-3625

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

Name of Employer Occupation
MasterCard VP/Systems Development

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-5-13-31

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Randall Leonard

Mailing Address 5555 Winghaven Boulevard

City State Zip Code
O Fallon MO 63368-3625

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

Name of Employer Occupation
MasterCard VP/Systems Development

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

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-5-12-31

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Randall Leonard

Mailing Address 5555 Winghaven Boulevard

City State Zip Code
O Fallon MO 63368-3625

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

Name of Employer Occupation
MasterCard VP/Systems Development

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

Date of Receipt

M M / D D / Y Y Y Y
11 / 15 / 2009

Transaction ID: 20091111-5-11-45

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 155

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Randall Leonard

Mailing Address 5555 Winghaven Boulevard

City State Zip Code
O Fallon MO 63368-3625

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

Name of Employer Occupation
MasterCard VP/Systems Development

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-5-11-15

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Linda Locke

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Public Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 744.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-12-12-0

Amount of Each Receipt this Period

62.00

C.

Full Name (Last, First, Middle Initial)
Linda Locke

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Public Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 744.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: 20090812-12-12-48

Amount of Each Receipt this Period

62.00

SUBTOTAL of Receipts This Page (optional) ▶

149.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 155
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Linda Locke	Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20090914-12-13-31
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 62.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation VP/Public Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 744.00	

B.	Full Name (Last, First, Middle Initial) Linda Locke	Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091013-12-12-31
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 62.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation VP/Public Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 744.00	

C.	Full Name (Last, First, Middle Initial) Linda Locke	Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091111-11-11-45
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 62.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation VP/Public Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 744.00	

SUBTOTAL of Receipts This Page (optional)	186.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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 ▼ 744.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-11-11-15
 Amount of Each Receipt this Period: 62.00

B.

Full Name (Last, First, Middle Initial)
Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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 ▼ 4992.00

Date of Receipt: 07 / 15 / 2009
Transaction ID: 20090713-20-12-0
 Amount of Each Receipt this Period: 416.00

C.

Full Name (Last, First, Middle Initial)
Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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 ▼ 4992.00

Date of Receipt: 08 / 15 / 2009
Transaction ID: 20090812-20-12-48
 Amount of Each Receipt this Period: 416.00

SUBTOTAL of Receipts This Page (optional) ► **894.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 155

(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

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) Michael Manchisi Mailing Address 2200 Mastercard Boulevard City State Zip Code O Fallon MO 63368-7263 FEC ID number of contributing federal political committee. C Name of Employer MasterCard Occupation SVP/Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4992.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 5 / 2 0 0 9 Transaction ID: 20090914-20-13-31 Amount of Each Receipt this Period 416.00
B.	Full Name (Last, First, Middle Initial) Michael Manchisi Mailing Address 2200 Mastercard Boulevard City State Zip Code O Fallon MO 63368-7263 FEC ID number of contributing federal political committee. C Name of Employer MasterCard Occupation SVP/Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4992.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9 Transaction ID: 20091013-20-12-31 Amount of Each Receipt this Period 416.00
C.	Full Name (Last, First, Middle Initial) Michael Manchisi Mailing Address 2200 Mastercard Boulevard City State Zip Code O Fallon MO 63368-7263 FEC ID number of contributing federal political committee. C Name of Employer MasterCard Occupation SVP/Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4992.00	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 9 Transaction ID: 20091111-19-11-45 Amount of Each Receipt this Period 416.00

SUBTOTAL of Receipts This Page (optional) ▶

1248.00

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

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

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

FOR LINE NUMBER: PAGE 69 / 155

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard SVP/Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-19-11-15

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)
Wylene Manley

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Finance Leader, Financial Systems

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

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 5 / 2 0 0 9

Transaction ID: 20090914-8-13-31

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Wylene Manley

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Finance Leader, Financial Systems

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-8-12-31

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

466.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Wylene Manley

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Finance Leader, Financial Systems

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2009

Transaction ID: 20091111-8-11-45

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Wylene Manley

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Finance Leader, Financial Systems

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2009

Transaction ID: 20091211-8-11-15

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2009

Transaction ID: 20090713-4-12-0

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **90.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2009

Transaction ID: 20090812-4-12-48

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 20090914-4-13-31

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-4-12-31

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 155
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 9

Transaction ID: 20091111-4-11-45

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-4-11-15

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Jim Masterson

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 9

Transaction ID: 20091111-50-11-45

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **100.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 155

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Jim Masterson

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Counsel Sr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-50-11-15

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Bill Mathis

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard SVP/Account Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2610.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-40-12-0

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)
Bill Mathis

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard SVP/Account Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2610.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: 20090812-40-12-48

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional) ▶

600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Bill Mathis

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation SVP/Account Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2610.00

Date of Receipt 09 / 15 / 2009

Transaction ID: 20090914-40-13-31

Amount of Each Receipt this Period 290.00

B.

Full Name (Last, First, Middle Initial)
Ed McCraw

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Senior Business Leader, Corporate Comm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 15 / 2009

Transaction ID: 20090713-73-12-0

Amount of Each Receipt this Period 125.00

C.

Full Name (Last, First, Middle Initial)
Ed McCraw

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Senior Business Leader, Corporate Comm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 15 / 2009

Transaction ID: 20090812-73-12-48

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ▶ 540.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Ed McCraw

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Senior Business Leader, Corporate Comm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 09 / 15 / 2009
Transaction ID: 20090914-73-13-31
 Amount of Each Receipt this Period: 125.00

B.

Full Name (Last, First, Middle Initial)
Ed McCraw

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Senior Business Leader, Corporate Comm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-72-12-31
 Amount of Each Receipt this Period: 125.00

C.

Full Name (Last, First, Middle Initial)
Chris McWilton

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt: 07 / 15 / 2009
Transaction ID: 20090713-54-12-0
 Amount of Each Receipt this Period: 416.00

SUBTOTAL of Receipts This Page (optional) ► 666.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Chris McWilton

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 08 / 15 / 2009

Transaction ID: 20090812-54-12-48

Amount of Each Receipt this Period 416.00

B.

Full Name (Last, First, Middle Initial)
Chris McWilton

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 09 / 15 / 2009

Transaction ID: 20090914-54-13-31

Amount of Each Receipt this Period 416.00

C.

Full Name (Last, First, Middle Initial)
Chris McWilton

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-53-12-31

Amount of Each Receipt this Period 416.00

SUBTOTAL of Receipts This Page (optional) ► 1248.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 155
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Chris McWilton	Date of Receipt MM / DD / YYYY 11 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091111-52-11-45
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 4992.00	

B.	Full Name (Last, First, Middle Initial) Chris McWilton	Date of Receipt MM / DD / YYYY 12 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091211-52-11-15
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 4992.00	

C.	Full Name (Last, First, Middle Initial) John Meister	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 2200 Mastercard Boulevard	Transaction ID: 20090713-14-12-0
	City O Fallon State MO Zip Code 63368-7263	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	932.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 155
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
John Meister

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2009

Transaction ID: 20090812-14-12-48

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
John Meister

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 20090914-14-13-31

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
John Meister

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-14-12-31

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
John Meister

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 11 / 15 / 2009
Transaction ID: 20091111-13-11-45
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
John Meister

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-13-11-15
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 07 / 15 / 2009
Transaction ID: 20090713-21-12-0
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► **300.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 08 / 15 / 2009
Transaction ID: 20090812-21-12-48
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 09 / 15 / 2009
Transaction ID: 20090914-21-13-31
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-21-12-31
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 11 / 15 / 2009
Transaction ID: 20091111-20-11-45
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-20-11-15
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
Catherine Murchie

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Organizational Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 08 / 03 / 2009
Transaction ID: 683ED6A9E7162329BB4
 Amount of Each Receipt this Period: 1500.00

SUBTOTAL of Receipts This Page (optional) ► 1700.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Timothy Murphy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 07 / 15 / 2009

Transaction ID: 20090713-38-12-0

Amount of Each Receipt this Period 416.00

B.

Full Name (Last, First, Middle Initial)
Timothy Murphy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 08 / 15 / 2009

Transaction ID: 20090812-38-12-48

Amount of Each Receipt this Period 416.00

C.

Full Name (Last, First, Middle Initial)
Timothy Murphy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 09 / 15 / 2009

Transaction ID: 20090914-38-13-31

Amount of Each Receipt this Period 416.00

SUBTOTAL of Receipts This Page (optional) ► 1248.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 155
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Timothy Murphy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-38-12-31

Amount of Each Receipt this Period 416.00

B.

Full Name (Last, First, Middle Initial)
Timothy Murphy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 11 / 15 / 2009

Transaction ID: 20091111-37-11-45

Amount of Each Receipt this Period 416.00

C.

Full Name (Last, First, Middle Initial)
Timothy Murphy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 12 / 15 / 2009

Transaction ID: 20091211-37-11-15

Amount of Each Receipt this Period 416.00

SUBTOTAL of Receipts This Page (optional) ► 1248.00

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

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

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

FOR LINE NUMBER: PAGE 84 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code
Miami FL 33131-2951

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

Name of Employer MasterCard Occupation SVP/Senior Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2009

Transaction ID: 20090713-58-12-0

Amount of Each Receipt this Period
124.00

B. Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code
Miami FL 33131-2951

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

Name of Employer MasterCard Occupation SVP/Senior Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2009

Transaction ID: 20090812-58-12-48

Amount of Each Receipt this Period
124.00

C. Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City State Zip Code
Miami FL 33131-2951

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

Name of Employer MasterCard Occupation SVP/Senior Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 20090914-58-13-31

Amount of Each Receipt this Period
124.00

SUBTOTAL of Receipts This Page (optional) ► 372.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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) Kenneth Najour		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 801 Brickell Avenue Suite 130		Transaction ID: 20091013-57-12-31
City Miami	State FL	Zip Code 33131-2951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation SVP/Senior Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

B.

Full Name (Last, First, Middle Initial) Kenneth Najour		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 801 Brickell Avenue Suite 130		Transaction ID: 20091111-56-11-45
City Miami	State FL	Zip Code 33131-2951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation SVP/Senior Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

C.

Full Name (Last, First, Middle Initial) Kenneth Najour		Date of Receipt MM / DD / YYYY 12 / 15 / 2009
Mailing Address 801 Brickell Avenue Suite 130		Transaction ID: 20091211-56-11-15
City Miami	State FL	Zip Code 33131-2951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation SVP/Senior Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1488.00	

SUBTOTAL of Receipts This Page (optional)	372.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 86 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Charlotte Niel

Mailing Address 2999 Oak Road

City State Zip Code
Walnut Creek CA 94597-2066

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

Name of Employer MasterCard Occupation VP/Member Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-22-13-31

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Charlotte Niel

Mailing Address 2999 Oak Road

City State Zip Code
Walnut Creek CA 94597-2066

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

Name of Employer MasterCard Occupation VP/Member Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-22-12-31

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Charlotte Niel

Mailing Address 2999 Oak Road

City State Zip Code
Walnut Creek CA 94597-2066

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

Name of Employer MasterCard Occupation VP/Member Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2009

Transaction ID: 20091111-21-11-45

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 87 / 155
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) Charlotte Niel		Date of Receipt MM / DD / YYYY 12 / 15 / 2009
Mailing Address 2999 Oak Road		Transaction ID: 20091211-21-11-15
City Walnut Creek	State CA	Zip Code 94597-2066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer MasterCard	Occupation VP/Member Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Heather Nolan		Date of Receipt MM / DD / YYYY 07 / 15 / 2009
Mailing Address 2000 Purchase Street		Transaction ID: 20090713-39-12-0
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MasterCard	Occupation Business Leader, Franchise Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.

Full Name (Last, First, Middle Initial) Heather Nolan		Date of Receipt MM / DD / YYYY 08 / 15 / 2009
Mailing Address 2000 Purchase Street		Transaction ID: 20090812-39-12-48
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MasterCard	Occupation Business Leader, Franchise Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 155
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Heather Nolan	Date of Receipt MM / DD / YYYY 09 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20090914-39-13-31
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation Business Leader, Franchise Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 600.00	

B.	Full Name (Last, First, Middle Initial) Heather Nolan	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091013-39-12-31
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation Business Leader, Franchise Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 600.00	

C.	Full Name (Last, First, Middle Initial) Heather Nolan	Date of Receipt MM / DD / YYYY 11 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091111-38-11-45
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation Business Leader, Franchise Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 155
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Heather Nolan

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Franchise Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-38-11-15
 Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
Patrick O'Sullivan

Mailing Address 100 Manhattanville Road

City Purchase State NY Zip Code 10577-2134

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 ▼ 1488.00

Date of Receipt: 07 / 15 / 2009
Transaction ID: 20090713-18-12-0
 Amount of Each Receipt this Period: 124.00

C.

Full Name (Last, First, Middle Initial)
Patrick O'Sullivan

Mailing Address 100 Manhattanville Road

City Purchase State NY Zip Code 10577-2134

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 ▼ 1488.00

Date of Receipt: 08 / 15 / 2009
Transaction ID: 20090812-18-12-48
 Amount of Each Receipt this Period: 124.00

SUBTOTAL of Receipts This Page (optional) ► 298.00

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

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

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

FOR LINE NUMBER: PAGE 90 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Patrick O'Sullivan
 Mailing Address 100 Manhattanville Road
 City State Zip Code
 Purchase NY 10577-2134
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 5 / 2 0 0 9
Transaction ID: 20090914-18-13-31
 Amount of Each Receipt this Period
 124.00
 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 ▼ 1488.00

B. Full Name (Last, First, Middle Initial)
Patrick O'Sullivan
 Mailing Address 100 Manhattanville Road
 City State Zip Code
 Purchase NY 10577-2134
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 0 9
Transaction ID: 20091013-18-12-31
 Amount of Each Receipt this Period
 124.00
 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 ▼ 1488.00

C. Full Name (Last, First, Middle Initial)
Patrick O'Sullivan
 Mailing Address 2000 Purchase Street
 City State Zip Code
 Purchase NY 10577-2405
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 5 / 2 0 0 9
Transaction ID: 20091111-17-11-45
 Amount of Each Receipt this Period
 124.00
 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 ▼ 1488.00

SUBTOTAL of Receipts This Page (optional) ► 372.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 155
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Patrick O'Sullivan

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt 12 / 15 / 2009

Transaction ID: 20091211-17-11-15

Amount of Each Receipt this Period 124.00

B.

Full Name (Last, First, Middle Initial)
John Pagano

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2009

Transaction ID: 20090914-57-13-31

Amount of Each Receipt this Period 25.00

C.

Full Name (Last, First, Middle Initial)
John Pagano

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-56-12-31

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 174.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 155
(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

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)
John Pagano

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 15 / 2009
Transaction ID: 20091111-55-11-45
 Amount of Each Receipt this Period: 25.00

B.

Full Name (Last, First, Middle Initial)
John Pagano

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-55-11-15
 Amount of Each Receipt this Period: 25.00

C.

Full Name (Last, First, Middle Initial)
Joshua Peirez

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation SVP/Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 07 / 17 / 2009
Transaction ID: 99A2828CC0F4F12A8A8
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 550.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 155		
	<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

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) Joshua Peirez		Date of Receipt MM / DD / YYYY 08 / 17 / 2009		
	Mailing Address 2000 Purchase Street		Transaction ID: 66DF3623EB6F3CD620F		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 5000.00			

B.	Full Name (Last, First, Middle Initial) Joshua Peirez		Date of Receipt MM / DD / YYYY 09 / 17 / 2009		
	Mailing Address 2000 Purchase Street		Transaction ID: 5AA77AAF80307FFF4AE		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 5000.00			

C.	Full Name (Last, First, Middle Initial) Joshua Peirez		Date of Receipt MM / DD / YYYY 10 / 17 / 2009		
	Mailing Address 2000 Purchase Street		Transaction ID: 75A256C2BC52E9D8F40		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 5000.00			

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

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

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

FOR LINE NUMBER: PAGE 94 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Joshua Peirez
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation SVP/Associate General Counsel
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 11 / 17 / 2009
Transaction ID: 482EAD424AB77B83D21
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Joshua Peirez
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation SVP/Associate General Counsel
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 12 / 17 / 2009
Transaction ID: 57DE61C1C0BCB84884C
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Bob Reany
Mailing Address 2200 Mastercard Boulevard
City O Fallon State MO Zip Code 63368-7263
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Information Tech
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1320.00
Date of Receipt 07 / 15 / 2009
Transaction ID: 20090713-11-12-0
Amount of Each Receipt this Period 110.00

SUBTOTAL of Receipts This Page (optional) ► 1110.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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) Bob Reany		Date of Receipt MM / DD / YYYY 08 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20090812-11-12-48
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		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 ▼ 1320.00	

B.

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 09 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20090914-11-13-31
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		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 ▼ 1320.00	

C.

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091013-11-12-31
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		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 ▼ 1320.00	

SUBTOTAL of Receipts This Page (optional)	▶	330.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091111-10-11-45
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		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 ▼ 1320.00	

B.

Full Name (Last, First, Middle Initial) Bob Reany		Date of Receipt MM / DD / YYYY 12 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091211-10-11-15
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		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 ▼ 1320.00	

C.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 07 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20090713-9-12-0
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4992.00	

SUBTOTAL of Receipts This Page (optional)	▶	636.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 08 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20090812-9-12-48
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4992.00	

B.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 09 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20090914-9-13-31
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4992.00	

C.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091013-9-12-31
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4992.00	

SUBTOTAL of Receipts This Page (optional)	▶	1248.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Rob Reeg

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard SVP/Systems Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 9

Transaction ID: 20091111-9-11-45

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)
Rob Reeg

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard SVP/Systems Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-9-11-15

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)
Trina Reuben-Williams

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2134

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

Name of Employer Occupation
MasterCard Managing Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-69-12-0

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

872.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Trina Reuben-Williams		Date of Receipt MM / DD / YYYY 08 / 15 / 2009
Mailing Address 100 Manhattanville Road		Transaction ID: 20090812-69-12-48
City	State	Zip Code
Purchase	NY	10577-2134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer MasterCard	Occupation Managing Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

B.

Full Name (Last, First, Middle Initial) Trina Reuben-Williams		Date of Receipt MM / DD / YYYY 09 / 15 / 2009
Mailing Address 100 Manhattanville Road		Transaction ID: 20090914-69-13-31
City	State	Zip Code
Purchase	NY	10577-2134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer MasterCard	Occupation Managing Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

C.

Full Name (Last, First, Middle Initial) Trina Reuben-Williams		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 100 Manhattanville Road		Transaction ID: 20091013-68-12-31
City	State	Zip Code
Purchase	NY	10577-2134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer MasterCard	Occupation Managing Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Trina Reuben-Williams

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2134

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

Name of Employer Occupation
MasterCard Managing Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 9

Transaction ID: 20091111-66-11-45

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
Trina Reuben-Williams

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2134

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

Name of Employer Occupation
MasterCard Managing Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-66-11-15

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
Nat Paul Rosenberg

Mailing Address 8755 West Higgins Road

City State Zip Code
Chicago IL 60631-2708

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

Name of Employer Occupation
MasterCard VP/Team Lead NA Business Dev

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-29-12-0

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional) ▶

120.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 155
(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

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)
Nat Paul Rosenberg

Mailing Address 8755 West Higgins Road

City State Zip Code
Chicago IL 60631-2708

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

Name of Employer MasterCard Occupation VP/Team Lead NA Business Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2009

Transaction ID: 20090812-29-12-48

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Nat Paul Rosenberg

Mailing Address 8755 West Higgins Road

City State Zip Code
Chicago IL 60631-2708

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

Name of Employer MasterCard Occupation VP/Team Lead NA Business Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 20090914-29-13-31

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Nat Paul Rosenberg

Mailing Address 8755 West Higgins Road

City State Zip Code
Chicago IL 60631-2708

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

Name of Employer MasterCard Occupation VP/Team Lead NA Business Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-29-12-31

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 155
(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
							17

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

A.

Full Name (Last, First, Middle Initial)
Nat Paul Rosenberg

Mailing Address 8755 West Higgins Road

City Chicago State IL Zip Code 60631-2708

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

Name of Employer MasterCard Occupation VP/Team Lead NA Business Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 15 / 2009
Transaction ID: 20091111-28-11-45
Amount of Each Receipt this Period 40.00

B.

Full Name (Last, First, Middle Initial)
Nat Paul Rosenberg

Mailing Address 8755 West Higgins Road

City Chicago State IL Zip Code 60631-2708

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

Name of Employer MasterCard Occupation VP/Team Lead NA Business Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 15 / 2009
Transaction ID: 20091211-28-11-15
Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Richard Santoro

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 15 / 2009
Transaction ID: 20090713-81-12-0
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 180.00

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

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

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

FOR LINE NUMBER: PAGE 103 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Richard Santoro

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 15 / 2009
Transaction ID: 20090812-81-12-48
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Richard Santoro

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 15 / 2009
Transaction ID: 20090914-81-13-31
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Richard Santoro

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-80-12-31
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Richard Santoro

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 15 / 2009

Transaction ID: 20091111-77-11-45

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Richard Santoro

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 15 / 2009

Transaction ID: 20091211-77-11-15

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Joe Schuler

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Leader, Systems Programming

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 07 / 15 / 2009

Transaction ID: 20090713-46-12-0

Amount of Each Receipt this Period 85.00

SUBTOTAL of Receipts This Page (optional) ► 285.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 155
(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

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)
Joe Schuler

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Leader, Systems Programming

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2009

Transaction ID: 20090812-46-12-48

Amount of Each Receipt this Period
85.00

B.

Full Name (Last, First, Middle Initial)
Joe Schuler

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Leader, Systems Programming

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 20090914-46-13-31

Amount of Each Receipt this Period
85.00

C.

Full Name (Last, First, Middle Initial)
Joe Schuler

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Leader, Systems Programming

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-45-12-31

Amount of Each Receipt this Period
85.00

SUBTOTAL of Receipts This Page (optional) ► **255.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 / 155
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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) Joe Schuler		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091111-44-11-45
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer MasterCard	Occupation Leader, Systems Programming	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1020.00	

B.

Full Name (Last, First, Middle Initial) Joe Schuler		Date of Receipt MM / DD / YYYY 12 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091211-44-11-15
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer MasterCard	Occupation Leader, Systems Programming	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1020.00	

C.

Full Name (Last, First, Middle Initial) Jerrri Sculley		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091111-14-11-45
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer MasterCard	Occupation Business Leader, Billing Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	190.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 107 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Jerri Sculley
Mailing Address 2200 Mastercard Boulevard
City O Fallon State MO Zip Code 63368-7263
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Business Leader, Billing Services
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 12 / 15 / 2009
Transaction ID: 20091211-14-11-15
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Eileen Simon
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Associate General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 07 / 15 / 2009
Transaction ID: 20090713-34-12-0
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Eileen Simon
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Associate General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 08 / 15 / 2009
Transaction ID: 20090812-34-12-48
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 220.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 108 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Eileen Simon
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Associate General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 09 / 15 / 2009
Transaction ID: 20090914-34-13-31
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Eileen Simon
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Associate General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-34-12-31
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Eileen Simon
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation Associate General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 11 / 15 / 2009
Transaction ID: 20091111-33-11-45
Amount of Each Receipt this Period 100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 155

(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

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)
Eileen Simon

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Associate General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-33-11-15

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Support

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-35-12-0

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)
Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Support

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: 20090812-35-12-48

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

348.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 110 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 09 / 15 / 2009
Transaction ID: 20090914-35-13-31
Amount of Each Receipt this Period: 124.00

B. Full Name (Last, First, Middle Initial)
Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-35-12-31
Amount of Each Receipt this Period: 124.00

C. Full Name (Last, First, Middle Initial)
Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 11 / 15 / 2009
Transaction ID: 20091111-34-11-45
Amount of Each Receipt this Period: 124.00

SUBTOTAL of Receipts This Page (optional) ▶ 372.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 155
(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

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)
Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Support

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-34-11-15

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)
Carey Smith

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Risk Management

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-48-12-0

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)
Carey Smith

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Risk Management

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: 20090812-48-12-48

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 112 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Carey Smith
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Risk Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00
Date of Receipt 09 / 15 / 2009
Transaction ID: 20090914-48-13-31
Amount of Each Receipt this Period 124.00

B. Full Name (Last, First, Middle Initial)
Carey Smith
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Risk Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00
Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-47-12-31
Amount of Each Receipt this Period 124.00

C. Full Name (Last, First, Middle Initial)
Carey Smith
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Risk Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00
Date of Receipt 11 / 15 / 2009
Transaction ID: 20091111-46-11-45
Amount of Each Receipt this Period 124.00

SUBTOTAL of Receipts This Page (optional) ▶ 372.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 155

(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

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)
Carey Smith

Mailing Address 2000 Purchase Street

City	State	Zip Code
Purchase	NY	10577-2405

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

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 ▼ 1488.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-46-11-15

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)
Patricia Smith-Thurman

Mailing Address 2200 Mastercard Boulevard

City	State	Zip Code
O Fallon	MO	63368-7263

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

Name of Employer MasterCard	Occupation Group Head, Info Technology
--------------------------------	---

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-7-12-0

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Patricia Smith-Thurman

Mailing Address 2200 Mastercard Boulevard

City	State	Zip Code
O Fallon	MO	63368-7263

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

Name of Employer MasterCard	Occupation Group Head, Info Technology
--------------------------------	---

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: 20090812-7-12-48

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) ▶

724.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 155
(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

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)
Patricia Smith-Thurman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Info Technology

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3600.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-7-13-31

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
Patricia Smith-Thurman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Info Technology

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3600.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-7-12-31

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Patricia Smith-Thurman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Info Technology

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3600.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 15 / 2009

Transaction ID: 20091111-7-11-45

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 155
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
Patricia Smith-Thurman

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Group Head, Info Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2009

Transaction ID: 20091211-7-11-15

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation General Manager, Eastern Europe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2009

Transaction ID: 20090713-23-12-0

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation General Manager, Eastern Europe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2009

Transaction ID: 20090812-23-12-48

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► 384.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 116 / 155
(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

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)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation General Manager, Eastern Europe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-23-13-31

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation General Manager, Eastern Europe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-23-12-31

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation General Manager, Eastern Europe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2009

Transaction ID: 20091111-22-11-45

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **126.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard General Manager, Eastern Europe

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-22-11-15

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)
Joseph Swezey

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-41-12-0

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)
Joseph Swezey

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: 20090812-41-12-48

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Joseph Swezey

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-41-13-31

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 10577-2405

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-40-12-31

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)
Joseph Swezey

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1488.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 15 / 2009

Transaction ID: 20091111-39-11-45

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 119 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Joseph Swezey
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
FEC ID number of contributing federal political committee. **C**
Name of Employer MasterCard Occupation VP/Financial Analysis
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1488.00
Date of Receipt MM / DD / YYYY 12 / 15 / 2009
Transaction ID: 20091211-39-11-15
Amount of Each Receipt this Period 124.00

B. Full Name (Last, First, Middle Initial)
Donna Terman
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
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 ▼ 1800.00
Date of Receipt MM / DD / YYYY 07 / 15 / 2009
Transaction ID: 20090713-36-12-0
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Donna Terman
Mailing Address 2000 Purchase Street
City Purchase State NY Zip Code 10577-2405
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 ▼ 1800.00
Date of Receipt MM / DD / YYYY 08 / 15 / 2009
Transaction ID: 20090812-36-12-48
Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) ▶ 424.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 / 155
	<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

A.	Full Name (Last, First, Middle Initial) Donna Terman	Date of Receipt MM / DD / YYYY 09 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20090914-36-13-31
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation VP/Bus Resources-Communication Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00	

B.	Full Name (Last, First, Middle Initial) Donna Terman	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091013-36-12-31
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation VP/Bus Resources-Communication Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00	

C.	Full Name (Last, First, Middle Initial) Donna Terman	Date of Receipt MM / DD / YYYY 11 / 15 / 2009
	Mailing Address 2000 Purchase Street	Transaction ID: 20091111-35-11-45
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation VP/Bus Resources-Communication Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 155
(check only one)

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

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

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

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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 ▼ 1800.00

Date of Receipt: MM / DD / YYYY
12 / 15 / 2009

Transaction ID: 20091211-35-11-15

Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Stephen Treacy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Fraud Reporting and A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: MM / DD / YYYY
07 / 15 / 2009

Transaction ID: 20090713-77-12-0

Amount of Each Receipt this Period: 37.50

C. Full Name (Last, First, Middle Initial)
Stephen Treacy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Fraud Reporting and A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: MM / DD / YYYY
08 / 15 / 2009

Transaction ID: 20090812-77-12-48

Amount of Each Receipt this Period: 37.50

SUBTOTAL of Receipts This Page (optional) ► **225.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 122 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Stephen Treacy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Fraud Reporting and A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2009

Transaction ID: 20090914-77-13-31

Amount of Each Receipt this Period 37.50

B.

Full Name (Last, First, Middle Initial)
Stephen Treacy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Fraud Reporting and A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-76-12-31

Amount of Each Receipt this Period 37.50

C.

Full Name (Last, First, Middle Initial)
Stephen Treacy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Fraud Reporting and A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 15 / 2009

Transaction ID: 20091111-73-11-45

Amount of Each Receipt this Period 37.50

SUBTOTAL of Receipts This Page (optional) ► **112.50**

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

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

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

FOR LINE NUMBER: PAGE 123 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Stephen Treacy
 Mailing Address 2000 Purchase Street
 City Purchase State NY Zip Code 10577-2405
 Date of Receipt MM / DD / YYYY 12 / 15 / 2009
Transaction ID: 20091211-73-11-15
 Amount of Each Receipt this Period 37.50
 FEC ID number of contributing federal political committee. C
 Name of Employer MasterCard Occupation Business Leader, Fraud Reporting and A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

B. Full Name (Last, First, Middle Initial)
Robert Trende
 Mailing Address 2200 Mastercard Boulevard
 City O Fallon State MO Zip Code 63368-7263
 Date of Receipt MM / DD / YYYY 07 / 15 / 2009
Transaction ID: 20090713-1-12-0
 Amount of Each Receipt this Period 50.00
 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 ▼ 600.00

C. Full Name (Last, First, Middle Initial)
Robert Trende
 Mailing Address 2200 Mastercard Boulevard
 City O Fallon State MO Zip Code 63368-7263
 Date of Receipt MM / DD / YYYY 08 / 15 / 2009
Transaction ID: 20090812-1-12-48
 Amount of Each Receipt this Period 50.00
 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 ▼ 600.00

SUBTOTAL of Receipts This Page (optional) ► 137.50
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 124 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Robert Trende

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	9

Transaction ID: 20090914-1-13-31

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Robert Trende

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	9

Transaction ID: 20091013-1-12-31

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Robert Trende

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	9

Transaction ID: 20091111-1-11-45

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Robert Trende

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2009

Transaction ID: 20091211-1-11-15

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Nikki Tsairis

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Global Group Practice Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
09 / 02 / 2009

Transaction ID: 3B8EE53FEBD0795D0B6

Amount of Each Receipt this Period
1500.00

C.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Head Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3480.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2009

Transaction ID: 20090713-65-12-0

Amount of Each Receipt this Period
290.00

SUBTOTAL of Receipts This Page (optional) ► **1840.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Group Head Finance

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2009

Transaction ID: 20090812-65-12-48

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Group Head Finance

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-65-13-31

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Group Head Finance

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-64-12-31

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional) ▶

870.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Group Head Finance

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 9

Transaction ID: 20091111-62-11-45

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Group Head Finance

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-62-11-15

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)
Jeroen Van Erven

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Financial Analysis

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-45-12-0

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

705.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 155
(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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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)
Jeroen Van Erven

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 08 / 15 / 2009
Transaction ID: 20090812-45-12-48
 Amount of Each Receipt this Period: 125.00

B.

Full Name (Last, First, Middle Initial)
Jeroen Van Erven

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 09 / 15 / 2009
Transaction ID: 20090914-45-13-31
 Amount of Each Receipt this Period: 125.00

C.

Full Name (Last, First, Middle Initial)
Jeroen Van Erven

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-44-12-31
 Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 129 / 155
(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

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)
Jeroen Van Erven

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 15 / 2009

Transaction ID: 20091111-43-11-45

Amount of Each Receipt this Period 125.00

B.

Full Name (Last, First, Middle Initial)
Jeroen Van Erven

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 12 / 15 / 2009

Transaction ID: 20091211-43-11-15

Amount of Each Receipt this Period 125.00

C.

Full Name (Last, First, Middle Initial)
Kathi Weber

Mailing Address 5555 Winghaven Boulevard

City O Fallon State MO Zip Code 63368-3625

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

Name of Employer MasterCard Occupation Senior Business Leader, Customer Support

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 15 / 2009

Transaction ID: 20091111-74-11-45

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 270.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 / 155

(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

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)
Kathi Weber

Mailing Address 5555 Winghaven Boulevard

City State Zip Code
O Fallon MO 63368-3625

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

Name of Employer Occupation
MasterCard Senior Business Leader, Customer Support

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-74-11-15

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Financial Systems

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: 20090713-43-12-0

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Financial Systems

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: 20090812-43-12-48

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 131 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Financial Systems

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 5 / 2 0 0 9

Transaction ID: 20090914-43-13-31

Amount of Each Receipt this Period
75.00

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Financial Systems

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-42-12-31

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation VP/Financial Systems

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 9

Transaction ID: 20091111-41-11-45

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **225.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 132 / 155
(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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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)
Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Financial Systems

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-41-11-15
 Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
Mimi Wood

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 07 / 15 / 2009
Transaction ID: 20090713-49-12-0
 Amount of Each Receipt this Period: 124.00

C. Full Name (Last, First, Middle Initial)
Mimi Wood

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 08 / 15 / 2009
Transaction ID: 20090812-49-12-48
 Amount of Each Receipt this Period: 124.00

SUBTOTAL of Receipts This Page (optional) ► **323.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A.

Full Name (Last, First, Middle Initial)
Mimi Wood

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 09 / 15 / 2009
Transaction ID: 20090914-49-13-31
 Amount of Each Receipt this Period: 124.00

B.

Full Name (Last, First, Middle Initial)
Mimi Wood

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-48-12-31
 Amount of Each Receipt this Period: 124.00

C.

Full Name (Last, First, Middle Initial)
Mimi Wood

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 11 / 15 / 2009
Transaction ID: 20091111-47-11-45
 Amount of Each Receipt this Period: 124.00

SUBTOTAL of Receipts This Page (optional) ► **372.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 134 / 155
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Mimi Wood

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1488.00

Date of Receipt: 12 / 15 / 2009

Transaction ID: 20091211-47-11-15

Amount of Each Receipt this Period: 124.00

B.

Full Name (Last, First, Middle Initial)
Kent Young

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Business Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt: 07 / 15 / 2009

Transaction ID: 20090713-47-12-0

Amount of Each Receipt this Period: 130.00

C.

Full Name (Last, First, Middle Initial)
Kent Young

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Business Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt: 08 / 15 / 2009

Transaction ID: 20090812-47-12-48

Amount of Each Receipt this Period: 130.00

SUBTOTAL of Receipts This Page (optional) ► 384.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 135 / 155
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Kent Young		Date of Receipt MM / DD / YYYY 09 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20090914-47-13-31
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
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 ▼ 1560.00	

B.

Full Name (Last, First, Middle Initial) Kent Young		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091013-46-12-31
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
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 ▼ 1560.00	

C.

Full Name (Last, First, Middle Initial) Kent Young		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20091111-45-11-45
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
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 ▼ 1560.00	

SUBTOTAL of Receipts This Page (optional)	390.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 / 155
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Kent Young

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Business Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt: 12 / 15 / 2009
Transaction ID: 20091211-45-11-15
 Amount of Each Receipt this Period: 130.00

B.

Full Name (Last, First, Middle Initial)
Kelly Zabel

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Audit Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 07 / 15 / 2009
Transaction ID: 20090713-64-12-0
 Amount of Each Receipt this Period: 40.00

C.

Full Name (Last, First, Middle Initial)
Kelly Zabel

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Audit Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 08 / 15 / 2009
Transaction ID: 20090812-64-12-48
 Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ► 210.00

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

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

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

FOR LINE NUMBER: PAGE 137 / 155
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Kelly Zabel

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Audit Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2009

Transaction ID: 20090914-64-13-31

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Kelly Zabel

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Audit Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-63-12-31

Amount of Each Receipt this Period
40.00

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

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Audit Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2009

Transaction ID: 20091111-61-11-45

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 138 / 155
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Kelly Zabel

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Audit Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 20091211-61-11-15

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)	▶	40.00
TOTAL This Period (last page this line number only)	▶	63007.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 139 / 155

<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 411 King St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: 08E124EE6F6200E6134</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 3.00</p> <p>001 Category/ Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 411 King St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: CFF6C4ACEDB8A98B794</p> <p>Date of Disbursement 07 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 47.70</p> <p>001 Category/ Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 411 King St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: CEC386B91E272CBBA63</p> <p>Date of Disbursement 08 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 3.00</p> <p>001 Category/ Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional) ▶

53.70

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 411 King St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0B92D4601D9966EE8B2</p> <p>Date of Disbursement 08 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 42.15</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 411 King St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EFB7FD20605F5B49A30</p> <p>Date of Disbursement 09 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 3.00</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 411 King St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 8E9E8A2E6DE2579EAB0</p> <p>Date of Disbursement 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 76.08</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

121.23

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

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

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

FOR LINE NUMBER: (check only one)

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<input 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

A. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: FB577AB81412695B00D Date of Disbursement 10 / 01 / 2009
	Amount of Each Disbursement this Period 3.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9F1567D65DB86961567 Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 41.55
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4B400F0578F6DDE98E6 Date of Disbursement 11 / 02 / 2009
	Amount of Each Disbursement this Period 3.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

47.55

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 142 / 155

<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

A. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4C91992EFBC4907779A Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 41.55
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7ADD3E6C7FD59937B68 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 3.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 408CF4741A40AC07720 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 41.55
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

86.10

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

308.58

**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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Carper for Senate <hr/> Mailing Address 19 East Commons Blvd Second Floor <hr/> City New Castle State DE Zip Code 19720 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Thomas R. Carper <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 6BF8C57ED60FCE3EA56 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Castle Campaign Fund <hr/> Mailing Address PO Box 133 <hr/> City Wilmington State DE Zip Code 19899 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Michael N. Castle <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 169416FB85DF5485118 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Citizens for Arlen Specter <hr/> Mailing Address 236 Massachusetts Avenue NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Arlen Specter <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 319DC31E0EED76A5DF5 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Committee To Re-Elect Henry Hank Johnson</p> <p>Mailing Address 6440 Old Hillandale Drive Suite 262</p> <p>City Lithonia State GA Zip Code 30058</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Henry C. Johnson, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5F88766F0FDA949F68C</p> <p>Date of Disbursement 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type 011</p>
<p>B. Full Name (Last, First, Middle Initial) Crowley for Congress</p> <p>Mailing Address 84-56 Grand Avenue</p> <p>City Elmhurst State NY Zip Code 11373</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Joseph Crowley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D209E45A4A8DE5EA13C</p> <p>Date of Disbursement 12 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type 011</p>
<p>C. Full Name (Last, First, Middle Initial) Crowley for Congress</p> <p>Mailing Address 84-56 Grand Avenue</p> <p>City Elmhurst State NY Zip Code 11373</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Joseph Crowley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: C192B4E19059B347C47</p> <p>Date of Disbursement 12 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type 011</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Dan 10</p> <p>Mailing Address 1088 Bishop Street Suite 1009</p> <p>City Honolulu State HI Zip Code 96813</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Daniel K. Inouye</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 8317A7A6CCAFFE52288</p> <p>Date of Disbursement 08 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 South Capitol Street, SE 2nd Floor</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Democratic Congressional Campaign Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution</p>	<p>Transaction ID: 85510563B05EA40D832</p> <p>Date of Disbursement 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Devin Nunes Campaign Committee</p> <p>Mailing Address PO Box 6545</p> <p>City Visalia State CA Zip Code 93290</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Devin G. Nunes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 21</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: CD3E6CA944DEE927F45</p> <p>Date of Disbursement 08 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ed Royce for Congress <hr/> Mailing Address PO Box 2525 <hr/> City Orange State CA Zip Code 92859 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Edward R. Royce <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 40	Transaction ID: 9593EB9BE0C2D5C6A8F Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Contribution
B. Full Name (Last, First, Middle Initial) Evan Bayh Committee <hr/> Mailing Address 850 Fort Wayne Avenue <hr/> City Indianapolis State IN Zip Code 46204 <hr/> Purpose of Disbursement 2010 General Candidate Name Evan Bayh <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District:	Transaction ID: 21DA907022EA01E14F4 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Contribution
C. Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC) <hr/> Mailing Address 25 East Main Street, Suite 200 <hr/> City Richmond State VA Zip Code 23219 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name Every Republican Is Crucial (ERICPAC) <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 8DAE78B774EFB2B563A Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

6500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) The Freedom Project</p> <p>Mailing Address 631-B Pennsylvania Ave., SE Basement Unit</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Freedom Project; the</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution</p>	<p>Transaction ID: 8A1F123C811BF3D508C</p> <p>Date of Disbursement 09 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Bill Posey</p> <p>Mailing Address PO Box 360877</p> <p>City Melbourne State FL Zip Code 32936</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Bill Posey</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 15</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: FEA74603A10C3BBF433</p> <p>Date of Disbursement 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Jason Chaffetz</p> <p>Mailing Address 315 Westfield Circle</p> <p>City Alpine State UT Zip Code 84004</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Jason Chaffetz</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 09E480FF8C21BC154C7</p> <p>Date of Disbursement 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
MasterCard International Inc. Employees' PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Roy Blunt</p> <p>Mailing Address PO Box 50100 PO Box 50100</p> <p>City Springfield State MO Zip Code 65805</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Roy D. Blunt</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 53EF5BA86BE25EADA35</p> <p>Date of Disbursement 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Schumer</p> <p>Mailing Address 509 Madison Ave Suite 1902</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Charles E. Schumer</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D99E8AE161E9A8D8BCC</p> <p>Date of Disbursement 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Jim Himes for Congress</p> <p>Mailing Address 857 Post Road, #312</p> <p>City Fairfield State CT Zip Code 06824</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name James A. Himes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 347FC567BF0DE8939C3</p> <p>Date of Disbursement 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

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

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(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)
MasterCard International Inc. Employees' PAC

<p>A. Full Name (Last, First, Middle Initial) Jobs, Economy and Budget Fund (JEB FUND)</p> <p>Mailing Address 7315 Wisconsin Avenue Suite 310 East</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Jobs, Economy and Budget Fund (JEB FUND)</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District: Contribution</p>	<p>Transaction ID: 39E327C9F459D83626C</p> <p>Date of Disbursement 12 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Jobs, Opportunities and Education, Pac (JOE-PAC)</p> <p>Mailing Address 84-56 Grand Avenue</p> <p>City Elmhurst State NY Zip Code 11373</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Jobs, Opportunities and Education, Pac (JOE-PAC)</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District: Contribution</p>	<p>Transaction ID: BB35B5E1A7EF8567441</p> <p>Date of Disbursement 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Joe Donnelly for Congress</p> <p>Mailing Address PO Box 1961</p> <p>City South Bend State IN Zip Code 46634</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Joe Donnelly</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IN District: 02 Contribution</p>	<p>Transaction ID: F32C2B50DA4729C7403</p> <p>Date of Disbursement 12 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9000.00

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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)
MasterCard International Inc. Employees' PAC

<p>A. Full Name (Last, First, Middle Initial) Leadership for America's Future Pac (LEAD PAC)</p> <p>Mailing Address 228 S. Washington Street Suite 115</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Leadership for America's Future Pac (LEAD PAC)</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution</p>	<p>Transaction ID: 2BFB4B724E3FBAB5D4D Date of Disbursement 08 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Lisa Murkowski for Us Senate</p> <p>Mailing Address PO Box 100847</p> <p>City Anchorage State AK Zip Code 99510</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Lisa A. Murkowski</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7E79FE6C2EBA0985749 Date of Disbursement 12 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Lisa Murkowski for Us Senate</p> <p>Mailing Address PO Box 100847</p> <p>City Anchorage State AK Zip Code 99510</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Lisa A. Murkowski</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: AEC2755896B861AA9B8 Date of Disbursement 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

Use separate schedule(s)
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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)
MasterCard International Inc. Employees' PAC

<p>A. Full Name (Last, First, Middle Initial) Majority Committee Pac--Mc Pac</p> <p>Mailing Address PO Box 10134</p> <p>City Bakersfield State CA Zip Code 93389</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Majority Committee Pac--Mc Pac</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution</p>	<p>Transaction ID: 684EC687AAC5B20A84F</p> <p>Date of Disbursement 08 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) McConnell Senate Committee '14</p> <p>Mailing Address PO Box 1496</p> <p>City Louisville State KY Zip Code 40201</p> <p>Purpose of Disbursement 2014 Primary</p> <p>Candidate Name Mitch McConnell</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 8805E32AC8F96D21412</p> <p>Date of Disbursement 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) McHenry for Congress</p> <p>Mailing Address PO Box 1406</p> <p>City Hickory State NC Zip Code 28603</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Patrick Timothy McHenry</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 34587A90128E2FC6187</p> <p>Date of Disbursement 12 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

Use separate schedule(s)
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Detailed Summary Page

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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)
MasterCard International Inc. Employees' PAC

<p>A. Full Name (Last, First, Middle Initial) Meeks for Congress</p> <p>Mailing Address 153-01 Jamaica Ave. Suite 535 219-10 South Conduit Avenue</p> <p>City Jamaica State NY Zip Code 11432</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Gregory W. Meeks</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: C1F0AC1C05383CB9B2A Date of Disbursement 08 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type 011</p>
<p>B. Full Name (Last, First, Middle Initial) Melissa Bean for Congress</p> <p>Mailing Address PO Box 3068</p> <p>City Barrington State IL Zip Code 60010</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Melissa Luburich Bean</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 570AE9B95A52FDB1609 Date of Disbursement 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type 011</p>
<p>C. Full Name (Last, First, Middle Initial) Mike McMahon for Congress</p> <p>Mailing Address 66 Arnold Street</p> <p>City Staten Island State NY Zip Code 10301</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Michael E. McMahon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17B3A37CB311F5FC927 Date of Disbursement 09 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type 011</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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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)

<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

A. Full Name (Last, First, Middle Initial) Peters for Congress <hr/> Mailing Address PO Box 226 <hr/> City Bloomfield Hills State MI Zip Code 48303 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Gary C. Peters <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4AA03127D75127125C3 Date of Disbursement 12 / 07 / 2009
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Poe for Congress <hr/> Mailing Address PO Box 14222 <hr/> City Humble State TX Zip Code 77347 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Ted Poe <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 060C5401ABEDA5704FC Date of Disbursement 12 / 07 / 2009
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Schiff for Congress <hr/> Mailing Address 777 S. Figueroa St. Suite 4050 <hr/> City Los Angeles State CA Zip Code 90017 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Adam B. Schiff <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 29 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: C68158B04E606261D8C Date of Disbursement 08 / 17 / 2009
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Scott Garrett for Congress <hr/> Mailing Address PO Box 905 <hr/> City Newton State NJ Zip Code 07860 <hr/> Purpose of Disbursement 2010 Primary Candidate Name E. Scott Garrett <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D85B1227EEEE46442175 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Contribution
B. Full Name (Last, First, Middle Initial) Tallatchee Creek Inc. Pac <hr/> Mailing Address PO Box 29576 <hr/> City Washington State DC Zip Code 20017 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name Tallatchee Creek Inc. Pac <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 862DFC41E8B6571F590 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Contribution
C. Full Name (Last, First, Middle Initial) Texans for Lamar Smith <hr/> Mailing Address PO Box 6155 <hr/> City San Antonio State TX Zip Code 78209 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Lamar Smith <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 21 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: F780EC9FD0F586F7176 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Wasserman-Schultz for Congress

Transaction ID: F8505CC982C1457D314

Date of Disbursement

Mailing Address 1071 Twin Branch Ln

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	9

City State Zip Code
Weston FL 33326

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
2010 Primary

011
Category/ Type

Candidate Name
Debbie Wasserman Schultz

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 20

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

65000.00
