



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
NEW PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		109027.03
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	102459.03									
(c) Total Receipts (from Line 19) .....	110600.00	112100.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	213059.03	221127.03								
7. Total Disbursements (from Line 31) .....	62579.44	70647.44								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	150479.59	150479.59								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
NEW PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	70500.00	72000.00
(i) Itemized (use Schedule A) .....	100.00	100.00
(ii) Unitemized .....	70600.00	72100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	40000.00	40000.00
(c) Other Political Committees (such as PACs) .....	110600.00	112100.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	110600.00	112100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	110600.00	112100.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	13079.44	13147.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	13079.44	13147.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	49500.00	57500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	62579.44	70647.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	62579.44	70647.44

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	110600.00	112100.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	110600.00	112100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	13079.44	13147.44
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	13079.44	13147.44

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. AHLEM FARMS</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 24093 W AMERICAN AVE		<b>Transaction ID: SA11A1.5256</b>
City HILMAR	State CA	Zip Code 95324
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	PARTNERSHIP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. WILLIAM AHLEM</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 24093 W AMERICAN AVE		<b>Transaction ID: SA11A1.5256.0</b>
City HILMAR	State CA	Zip Code 95324
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer AHLEM FARMS	Occupation SELF EMPLOYED FARMER	PARTNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. RICHARD S ALLEN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 125 S BRIDGEST., SUITE 100		<b>Transaction ID: SA11A1.5261</b>
City VISALIA	State CA	Zip Code 93291
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer THE ALLEN GROUP	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. ASSEMI BROTHERS LLC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1396 W HERNDON AVE., #101		<b>Transaction ID: SA11A1.5273</b>	
City FRESNO	State CA	Zip Code 93711	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>		LLC (COMPANY) PARTNERSHIP	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. FARID ASSEMI</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1396 W HERNDON AVE., #101		<b>Transaction ID: SA11A1.5273.0</b>	
City FRESNO	State CA	Zip Code 93711	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>		PARTNER	
Name of Employer GRANVILLE HOMES	Occupation REAL ESTATE DEVELOPMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>C. LEONARD A BIDART</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 34741 7th STANDARD RD		<b>Transaction ID: SA11A1.5291</b>	
City BAKERSFIELD	State CA	Zip Code 93312	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer BIDART COMPANY	Occupation OWNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. CHRIS M CARATAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 33787 CECIL AVE		Transaction ID: SA11A1.5324
City State Zip Code DELANO CA 93215	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer M CARATAN, INC.	Occupation SELF EMPLOYED/FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. CHARLES AHLEM RANCH</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 23546 W AMERICAN AVE		Transaction ID: SA11A1.5243
City State Zip Code HILMAR CA 95324	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation SOLE PROPRIATORSHIP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. CHARLES AHLEM</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 23546 W AMERICAN AVE		Transaction ID: SA11A1.5243.0
City State Zip Code HILMAR CA 95324	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CHARLES AHLEM RANCH	Occupation SELF EMPLOYED FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 41
	<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)  
NEW PAC

A. Full Name (Last, First, Middle Initial) D.M. CAMP & SONS Mailing Address P.O.BOX 80007 City BAKERSFIELD State CA Zip Code 93380-0007 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.5285 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> PARTNERSHIP	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		0	1		2	0	0	6														
500.00																							
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																					
500.00																							

B. Full Name (Last, First, Middle Initial) EDWIN CAMP Mailing Address P.O. BOX 80007 City BAKERSFIELD State CA Zip Code 93380-0007 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.5285.0 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> [MEMO ITEM]	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		0	1		2	0	0	6														
500.00																							
Name of Employer D.M. CAMP & SONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation AG SALES Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																					
500.00																							

C. Full Name (Last, First, Middle Initial) DAN TUDOR & SONS Mailing Address 1081 ZACHARY AVE City DELANO State CA Zip Code 93215 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.5262 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> PARTNERSHIP	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	8		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		0	8		2	0	0	6														
500.00																							
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																					
500.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00
1000.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 41
	<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)  
NEW PAC

A. Full Name (Last, First, Middle Initial) DAN TUDOR		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6	
Mailing Address 11081 ZACHARY AVE		Transaction ID: SA11A1.5262.0	
City DELANO	State CA	Zip Code 93215	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		PARTNER	
Name of Employer DAN TUDOR & SONS	Occupation SELF EMPLOYED FARMER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) HOEKSTRA DAIRY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6	
Mailing Address 10836 HWY 120		Transaction ID: SA11A1.5251	
City OAKDALE	State CA	Zip Code 95361	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		PARTNERSHIP	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) WILLIAM (BILL) HOEKSTRA		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6	
Mailing Address 11700 MOUNTAIN OAK RD		Transaction ID: SA11A1.5251.0	
City OAKDALE	State CA	Zip Code 95361	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		PARTNER	
Name of Employer HOEKSTRA DAIRY		Occupation SELF EMPLOYED FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

[MEMO ITEM]

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. HRONIS LAND COMPANY</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 10443 HRONIS ROAD		Transaction ID: SA11A1.5325
City DELANO State CA Zip Code 93215	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. PETER HRONIS</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 10443 HRONIS ROAD		Transaction ID: SA11A1.5325.0
City DELANO State CA Zip Code 93215	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer HRONIS LAND COMPANY	Occupation OWNER/FARMING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

PARTNER  
[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. JAMES AHLEM DAIRY</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 9483 COLUMBUS AVE		Transaction ID: SA11A1.5247
City HILMAR State CA Zip Code 95324	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

PARTNERSHIP

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. JAMES AHLEM</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2006
Mailing Address 9483 COLUMBUS AVE		Transaction ID: SA11A1.5247.0
City State Zip Code HILMAR CA 95324	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	PARTNER	
Name of Employer Occupation JAMES AHLEM DAIRY DAIRY FARMER	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. EDWARD M KASHIAN</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006
Mailing Address 8365 N FRESNO STREET, SUITE 150		Transaction ID: SA11A1.5293
City State Zip Code FRESNO CA 93720	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation LANCE KASHIAN AND COMPANY DEVELOPER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. JEANNE C KASHIAN</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006
Mailing Address 8365 N FRESNO STREET, SUITE 150		Transaction ID: SA11A1.5295
City State Zip Code FRESNO CA 93720	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation LANCE KASHIAN AND COMPANY DEVELOPER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. MING BIN KOU</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 1912 E VERNON AVE		<b>Transaction ID: SA11A1.5297</b>	
City State Zip Code VERNON CA 90058	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. KOVACEVICH '5' FARMS</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2006	
Mailing Address 1125 ROUNDS STREET		<b>Transaction ID: SA11A1.5308</b>	
City State Zip Code DELANO CA 93215	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

PARTNERSHIP

Full Name (Last, First, Middle Initial) <b>C. MARK KOVACEVICH</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2006	
Mailing Address 1125 ROUNDS STREET		<b>Transaction ID: SA11A1.5308.0</b>	
City State Zip Code DELANO CA 93215	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KOVACEVICH '5' FARMS	Occupation FARMER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

PARTNER

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. DONALD E LUDY</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2006
Mailing Address 28458 WOOLLOMES RD		<b>Transaction ID: SA11A1.5322</b>
City State Zip Code WASCO CA 93280	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer SELF EMPLOYED	Occupation CUSTOM FARMING/GROWER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. M &amp; V COMPANY</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 23 / 2006
Mailing Address 11239 FAMOSO-PORTERVILLE HWY		<b>Transaction ID: SA11A1.5305</b>
City State Zip Code DELANO CA 93215	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation PARTNERSHIP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. MARTIN J ZANINOVICH</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 23 / 2006
Mailing Address 11239 FAMOSO-PORT HWY		<b>Transaction ID: SA11A1.5305.0</b>
City State Zip Code DELANO CA 93215	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer JASMINE VINEYARDS, INC.	Occupation PARTNER <b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. RICHARD V MARTIN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 15926 LA LINDURA		<b>Transaction ID: SA11A1.5314</b>	
City State Zip Code WHITTIER CA 90603	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. MONARCH NUT COMPANY</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6	
Mailing Address 786 RD 188		<b>Transaction ID: SA11A1.5287</b>	
City State Zip Code DELANO CA 93215	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation PARTNERSHIP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. KEWEL MUNGER</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6	
Mailing Address 786 RD 188		<b>Transaction ID: SA11A1.5287.0</b>	
City State Zip Code DELANO CA 93215	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MONARCH NUT COMPANY	Occupation PARTNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 41
	<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)  
NEW PAC

**A.** Full Name (Last, First, Middle Initial)  
KATHY NYMAN

Mailing Address 20368 W AUGUST

City State Zip Code  
HILMAR CA 95324

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

Name of Employer Occupation  
SELF EMPLOYED DAIRY FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2006

Transaction ID: SA11A1.5254

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
PASKENTA BAND OF NOMLAKI INDIANS

Mailing Address 1012 S STREET

City State Zip Code  
ORLAND CA 95963

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: SA11A1.5301

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
ROAD RUNNER FARMING, LLC

Mailing Address 401 RD 192

City State Zip Code  
DELANO CA 93215

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2006

Transaction ID: SA11A1.5318

Amount of Each Receipt this Period  
1000.00

COMPANY/PARTNERSHIP

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7000.00**

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



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. ANDREW PANDOL</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2006
Mailing Address 401 RD 192		Transaction ID: SA11A1.5318.0
City DELANO      State CA      Zip Code 93215	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	PARTNER	
Name of Employer ROAD RUNNER FARMING, LLC      Occupation FARMER	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. ALBINO S RODRIGUES</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2006
Mailing Address P.O. BOX 2840		Transaction ID: SA11A1.5277
City SANTA CRUZ      State CA      Zip Code 95063	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer DRISCOLL      Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. SIKH FARMS</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2006
Mailing Address P.O. BOX 430		Transaction ID: SA11A1.5316
City DELANO      State CA      Zip Code 93216	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. BIR DILLHON</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2006	
Mailing Address P.O. BOX 430		<b>Transaction ID: SA11A1.5316.0</b>	
City DELANO	State CA	Zip Code 93216	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		PARTNER	
Name of Employer SILKH FARMS	Occupation FARM OWNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. ROBERT E SMITTCAMP</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 5811 N FORKNER AVE		<b>Transaction ID: SA11A1.5312</b>	
City FRESNO	State CA	Zip Code 93711	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer LYONS MAGNUS	Occupation OWNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. SWANSON ENTERPRISES, LLC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2006	
Mailing Address 5213 W MAIN STREET P.O. BOX 2367		<b>Transaction ID: SA11A1.5392</b>	
City TURLOCK	State CA	Zip Code 95381	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

PARTNERSHIP

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 41
	<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)  
NEW PAC

**A.** Full Name (Last, First, Middle Initial)  
RICHARD SWANSON

Mailing Address 5213 W MAIN STREET  
P.O. BOX 2367

City TURLOCK State CA Zip Code 95381

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

Name of Employer SWANSON ENTERPRISES, LLC Occupation SELF EMPLOYED - FEED INDUSTRY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: SA11A1.5392.0

Amount of Each Receipt this Period  
5000.00

PARTNER

**[MEMO ITEM]**

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

Mailing Address P.O. BOX 35

City HILMAR State CA Zip Code 95321

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

Name of Employer SELF EMPLOYED Occupation RANCHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.5320

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1 VIEJAS GRADE ROAD

City ALPINE State CA Zip Code 91901

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.5260

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 41
	<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. WESTERN RANCH PLAZA, LLC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address P.O. BOX 3307		<b>Transaction ID: SA11A1.5388</b>	
City TURLOCK	State CA	Zip Code 95381	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		PARTNERSHIP	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. MATTHEW SWANSON</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address P.O. BOX 3307		<b>Transaction ID: SA11A1.5388.0</b>	
City TURLOCK	State CA	Zip Code 95381	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		PARTNER	
Name of Employer ASSOCIATED FEED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation EXECUTIVE Aggregate Year-to-Date ▼ 5000.00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. RICHARD ZACKY</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 6556 N BLACKHAWK LN		<b>Transaction ID: SA11A1.5279</b>	
City CLOVIS	State CA	Zip Code 93611	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer ZACKY FARMS LLC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation MANAGER Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	70500.00

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

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

FOR LINE NUMBER: PAGE 21 / 41  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW PAC

**A.** Full Name (Last, First, Middle Initial)  
CALIFORNIA DAIRIES INC FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2198

City State Zip Code  
LOS BANOS CA 93635

FEC ID number of contributing federal political committee. **C** C00349746

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

**Transaction ID:** SA11C.5304

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
CALIFORNIA GRAPE & TREE FRUIT LEAGUE POLITICAL ACTION COMMITTEE

Mailing Address 1540 E SHAW SUITE 120

City State Zip Code  
FRESNO CA 93710

FEC ID number of contributing federal political committee. **C** C00121582

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID:** SA11C.5292

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
DEAN FOODS COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 2515 McKinney Avenue Suite 1200

City State Zip Code  
Dallas TX 75201

FEC ID number of contributing federal political committee. **C** C00340083

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

**Transaction ID:** SA11C.5241

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 41
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. EDISON INTERNATIONAL PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 520 S GRAND AVENUE SUITE 700		<b>Transaction ID: SA11C.5272</b>	
City State Zip Code LOS ANGELES CA 90071	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b> C00019653			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. FEDERAL NATIONAL MORTGAGE ASSOCIATION POLITICAL ACTION COMMITTEE AKA FANNIE MAE</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 3900 Wisconsin Avenue NW		<b>Transaction ID: SA11C.5303</b>	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00393520			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C. GENENTECH INC POLITICAL ACTION COMMITTEE (GENENPAC)</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 460 POINT SAN BRUNO BLVD		<b>Transaction ID: SA11C.5299</b>	
City State Zip Code SO SAN FRANCISCO CA 94080	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b> C00199257			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

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

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

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

FOR LINE NUMBER: PAGE 23 / 41  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW PAC

**A.** Full Name (Last, First, Middle Initial)  
J.G. BOSWELL COMPANY EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 101 WEST WALNUT STREET

City State Zip Code  
PASADENA CA 91103

FEC ID number of contributing federal political committee. **C** C00082677

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

**Transaction ID:** SA11C.5280

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
R.J. REYNOLDS POLITICAL ACTION COMMITTEE; REYNOLDS AMERICAN INC.

Mailing Address P. O. Box 718

City State Zip Code  
Winston-Salem NC 27102

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

**Transaction ID:** SA11C.5284

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
SONNENSCHN NATH & ROSENTHAL LLP POLITICAL ACTION COMMITTEE (SONNENSCHN PAC)

Mailing Address 1301 K STREET NW  
SUITE 600 EAST TOWER

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00216127

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

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

**Transaction ID:** SA11C.5267

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10000.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 41  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW PAC

**A.** Full Name (Last, First, Middle Initial)  
UST INC. EXECUTIVES ADMINISTRATORS AND MANAGERS POLITICAL ACTION COMMITTEE

Mailing Address 100 West Putnam Avenue

City State Zip Code  
Greenwich CT 06830

FEC ID number of contributing federal political committee. **C** C00104851

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: SA11C.5282

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
VIACOM INTERNATIONAL INC. POLITICAL ACTION COMMITTEE

Mailing Address 1501 M Street Suite 1100 NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00167759

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA11C.5270

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
WESTERN UNITED DAIRYMEN'S ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1315 K STREET

City State Zip Code  
MODESTO CA 95354

FEC ID number of contributing federal political committee. **C** C00186072

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA11C.5311

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 9500.00

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



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 41
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial)  
**A. WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

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

Transaction ID: SA11C.5269

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	40000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. STEHPANIE AMARAL</b>		Transaction ID: SB21B.5235 Date of Disbursement 06 / 21 / 2006
Mailing Address 2534 S MONTECITO CT		Amount of Each Disbursement this Period 217.10
City VISALIA State CA Zip Code 93277	003 Category/ Type	
Purpose of Disbursement FUND RAISER EVENT - FACILITY RENTAL		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Transaction ID: SB21B.5239 Date of Disbursement 06 / 21 / 2006
Mailing Address 300 FIRST STREET, SE		Amount of Each Disbursement this Period 658.90
City WASHINGTON State DC Zip Code 20003	003 Category/ Type	
Purpose of Disbursement FUND RAISER EVENT - CATORING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CENTRAL VALLEY BUSINESS FORMS</b>		Transaction ID: SB21B.5231 Date of Disbursement 06 / 07 / 2006
Mailing Address 7500 W SUNNYVIEW AVE		Amount of Each Disbursement this Period 2604.16
City VISALIA State CA Zip Code 93291	003 Category/ Type	
Purpose of Disbursement FUND RAISER COLLATERAL ITEMS		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3480.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. CITI CARDS</b>		<b>Transaction ID:</b> SB21B.5238 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address P.O. BOX 6406		Amount of Each Disbursement this Period 138.86
City THE LAKES State NV Zip Code 88901	Purpose of Disbursement TRAVEL EXPENSE - FUEL Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 002

Full Name (Last, First, Middle Initial) <b>B. CLARISSA N HENDERSON</b>		<b>Transaction ID:</b> SB21B.5226 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6
Mailing Address 2340 S TERRACE ST		Amount of Each Disbursement this Period 1000.00
City VISALIA State CA Zip Code 93277	Purpose of Disbursement CONSULTING: OFFICE MANAGEMENT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. CLARISSA N HENDERSON</b>		<b>Transaction ID:</b> SB21B.5229 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6
Mailing Address 2340 S TERRACE ST		Amount of Each Disbursement this Period 200.00
City VISALIA State CA Zip Code 93277	Purpose of Disbursement CONSULTING: OFFICE MANAGEMENT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1338.86
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. CLARISSA N HENDERSON</b>		Transaction ID: SB21B.5230 Date of Disbursement 06 / 07 / 2006
Mailing Address 2340 S TERRACE ST		Amount of Each Disbursement this Period 6028.13
City VISALIA State CA Zip Code 93277	Purpose of Disbursement FUND RAISER EXPENSES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) <b>B. AVIS RENT A CAR SYSTEM, INC.</b>		Transaction ID: SB21B.5230.0 Date of Disbursement 06 / 07 / 2006
Mailing Address 6 SYLVAN WAY		Amount of Each Disbursement this Period 995.58
City PARSIPPANY State NJ Zip Code 07054	Purpose of Disbursement FUND RAISING EVENT EXPENSE - VAN RENTAL Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BAILEYANA WINERY</b>		Transaction ID: SB21B.5230.3 Date of Disbursement 06 / 07 / 2006
Mailing Address 5828 ORCUTT RD		Amount of Each Disbursement this Period 250.00
City SAN LUIS OPISPO State CA Zip Code 93401	Purpose of Disbursement FUND RAISING EVENT EXPENSE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6028.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. FIALAS CHOCO-LATTE</b>		Transaction ID: SB21B.5230.5 Date of Disbursement
Mailing Address 1653 OLD PRICE CANYON RD		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City SAN LUIS OPISPO	State CA	Zip Code 93401
Purpose of Disbursement FUND RAISING EVENT EXPENSE	<input type="text" value="003"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="949.22"/> <b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. OLD EDNA HALL</b>		Transaction ID: SB21B.5230.6 Date of Disbursement
Mailing Address 1655 OLD PRICE CANYON RD		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City SAN LUIS OPISPO	State CA	Zip Code 93401
Purpose of Disbursement FUND RAISING EVENT EXPENSE	<input type="text" value="003"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="356.00"/> <b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. THE CLIFFS</b>		Transaction ID: SB21B.5230.7 Date of Disbursement
Mailing Address 2757 SHELL BEACH RD		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City SHELL BEACH	State CA	Zip Code 93449
Purpose of Disbursement FUND RAISING EXPENSE	<input type="text" value="003"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="298.75"/> <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. THE CLIFFS</b>		Transaction ID: SB21B.5230.8 Date of Disbursement
Mailing Address 2757 SHELL BEACH RD		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City SHELL BEACH	State CA	Zip Code 93449
Purpose of Disbursement TRAVEL EXPENSE: STAFF	<input type="text" value="003"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="311.72"/>
		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. THE CLIFFS</b>		Transaction ID: SB21B.5230.9 Date of Disbursement
Mailing Address 2757 SHELL BEACH RD		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City SHELL BEACH	State CA	Zip Code 93449
Purpose of Disbursement TRAVEL EXP: GUEST SPEAKER LATHAM	<input type="text" value="003"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="356.00"/>
		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. THE CLIFFS</b>		Transaction ID: SB21B.5230.10 Date of Disbursement
Mailing Address 2757 SHELL BEACH RD		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City SHELL BEACH	State CA	Zip Code 93449
Purpose of Disbursement TRAVEL EXP: GUEST SPEAKER SIMPSON	<input type="text" value="003"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="452.78"/>
		<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. HUNTER RANCH GOLF COURSE</b>		Transaction ID: SB21B.5230.11 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6
Mailing Address 4041 HYW 46 EAST		Amount of Each Disbursement this Period 760.00
City PASO ROBLES State CA Zip Code 93446	[MEMO ITEM]	
Purpose of Disbursement FUND RAISING EXPENSE Candidate Name		003 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. TOGNI BRANCH</b>		Transaction ID: SB21B.5232 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6
Mailing Address 116 E MAIN ST		Amount of Each Disbursement this Period 206.29
City VISALIA State CA Zip Code 93291	001 Category/Type	
Purpose of Disbursement OFFICE SUPPLY - PAPER Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. TOLOSA WINERY</b>		Transaction ID: SB21B.5222 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6
Mailing Address 4910 EDNA ROAD		Amount of Each Disbursement this Period 1000.00
City SAN LUIS OBISPO State CA Zip Code 93401	003 Category/Type	
Purpose of Disbursement DEPOSIT-FUND RAISER EVENT - CATORING Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1206.29
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. TOLOSA WINERY</b>		Transaction ID: SB21B.5234	
Mailing Address 4910 EDNA ROAD		Date of Disbursement 06 / 14 / 2006	
City SAN LUIS OBISPO	State CA	Zip Code 93401	Amount of Each Disbursement this Period 462.89
Purpose of Disbursement FUND RAISER EVENT - CATORING		003 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>462.89</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>12516.33</b>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. BACHMANN FOR CONGRESS</b>		Transaction ID: SB23.5370 Date of Disbursement 06 / 27 / 2006
Mailing Address    BOX 49756		Amount of Each Disbursement this Period 2000.00
City BLAINE	State    Zip Code MN        55449	
Purpose of Disbursement Candidate Name MICHELE M BACHMANN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN        District: 06		

Full Name (Last, First, Middle Initial) <b>B. BILIRAKIS FOR CONGRESS</b>		Transaction ID: SB23.5367 Date of Disbursement 06 / 27 / 2006
Mailing Address    610 S. Boulevard		Amount of Each Disbursement this Period 2000.00
City Tampa	State    Zip Code FL        33606	
Purpose of Disbursement Candidate Name GUS MICHAEL BILIRAKIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL        District: 09		

Full Name (Last, First, Middle Initial) <b>C. CHARLES TAYLOR FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.5345 Date of Disbursement 05 / 10 / 2006
Mailing Address    PO Box 2355 PO Box 2355		Amount of Each Disbursement this Period 2000.00
City Asheville	State    Zip Code NC        28802	
Purpose of Disbursement Candidate Name CHARLES H TAYLOR		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC        District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. CHRIS WAKIM FOR CONGRESS</b>		<b>Transaction ID: SB23.5350</b> Date of Disbursement
Mailing Address PO Box 2176		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="10"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City Wheeling	State WV	Zip Code 26003
Purpose of Disbursement	<input type="text" value="011"/> Category/ Type	
Candidate Name CHRIS WAKIM	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 01		

Full Name (Last, First, Middle Initial) <b>B. CRAIG ROMERO FOR CONGRESS INC.</b>		<b>Transaction ID: SB23.5379</b> Date of Disbursement
Mailing Address P. O. Box 13657		<input type="text" value="06"/> <input type="text" value="06"/> / <input type="text" value="27"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City New Iberia	State LA	Zip Code 70562
Purpose of Disbursement	<input type="text" value="011"/> Category/ Type	
Candidate Name CRAIG F ROMERO	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: LA District: 03		

Full Name (Last, First, Middle Initial) <b>C. DAVID MCSWEENEY FOR CONGRESS</b>		<b>Transaction ID: SB23.5376</b> Date of Disbursement
Mailing Address 8 HUBBELL COURT		<input type="text" value="06"/> <input type="text" value="06"/> / <input type="text" value="27"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City BARRINGTON HILLS	State IL	Zip Code 60010
Purpose of Disbursement	<input type="text" value="011"/> Category/ Type	
Candidate Name S. DAVID MCSWEENEY	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 8		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. FITZPATRICK FOR CONGRESS</b>		<b>Transaction ID: SB23.5337</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 115 North Broad Street		Amount of Each Disbursement this Period 2000.00
City Doylestown State PA Zip Code 18901	011 Category/ Type	
Purpose of Disbursement		
Candidate Name MICHAEL G FITZPATRICK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FITZPATRICK FOR CONGRESS</b>		<b>Transaction ID: SB23.5354</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 115 North Broad Street		Amount of Each Disbursement this Period 1000.00
City Doylestown State PA Zip Code 18901	011 Category/ Type	
Purpose of Disbursement		
Candidate Name MICHAEL G FITZPATRICK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF CLAY SHAW</b>		<b>Transaction ID: SB23.5339</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address P.O. Box 2188 2600 NE 14th. Street Causeway		Amount of Each Disbursement this Period 2000.00
City Fort Lauderdale State FL Zip Code 33303	011 Category/ Type	
Purpose of Disbursement		
Candidate Name E. CLAY JR. SHAW		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAVE REICHERT</b>		<b>Transaction ID: SB23.5418</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address P. O. Box 53322		Amount of Each Disbursement this Period 1000.00
City Bellevue State WA Zip Code 98015		
Purpose of Disbursement	011 Category/Type	
Candidate Name DAVE REICHERT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF MIKE SODREL</b>		<b>Transaction ID: SB23.5334</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 702 North Shore Drive Suite 500		Amount of Each Disbursement this Period 2000.00
City Jeffersonville State IN Zip Code 47130		
Purpose of Disbursement	011 Category/Type	
Candidate Name MICHAEL E SODREL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF MIKE SODREL</b>		<b>Transaction ID: SB23.5359</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 702 North Shore Drive Suite 500		Amount of Each Disbursement this Period 1000.00
City Jeffersonville State IN Zip Code 47130		
Purpose of Disbursement	011 Category/Type	
Candidate Name MICHAEL E SODREL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SCOTT TIPTON</b>		<b>Transaction ID: SB23.5364</b>	
Mailing Address PO Box M		Date of Disbursement 06 / 27 / 2006	
City Cortez	State CO	Zip Code 81321	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name SCOTT RANDALL TIPTON			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CO	District: 03		

Full Name (Last, First, Middle Initial) <b>B. GARD FOR CONGRESS</b>		<b>Transaction ID: SB23.5361</b>	
Mailing Address PO BOX 277		Date of Disbursement 06 / 15 / 2006	
City GREEN BAY	State WI	Zip Code 54305	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name JOHN G GARD			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WI	District: 08		

Full Name (Last, First, Middle Initial) <b>C. GEOFF DAVIS FOR CONGRESS</b>		<b>Transaction ID: SB23.5353</b>	
Mailing Address 3161 Dixie Highway Suite F		Date of Disbursement 06 / 15 / 2006	
City Erlanger	State KY	Zip Code 41018	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name GEOFFREY C DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KY	District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. HEARTLAND VALUES PAC</b>		<b>Transaction ID:</b> SB23.5386
Mailing Address PO Box 505		Date of Disbursement 06 / 28 / 2006
City Sioux Falls	State SD	Zip Code 57101
Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HEATHER WILSON FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5331
Mailing Address P.O. BOX 14070 P.O. BOX 14070		Date of Disbursement 05 / 10 / 2006
City ALBUQUERQUE	State NM	Zip Code 87191
Purpose of Disbursement	Amount of Each Disbursement this Period 2000.00	
Candidate Name HEATHER A WILSON	Category/ Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM District: 01		

Full Name (Last, First, Middle Initial) <b>C. JIM GERLACH FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.5332
Mailing Address 911 WELSH AYRES WAY		Date of Disbursement 05 / 10 / 2006
City DOWNTOWN	State PA	Zip Code 19335
Purpose of Disbursement	Amount of Each Disbursement this Period 2000.00	
Candidate Name JIM GERLACH	Category/ Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. LAMBERTI FOR CONGRESS</b>		<b>Transaction ID: SB23.5385</b> Date of Disbursement 06 / 27 / 2006
Mailing Address PO BOX 785		Amount of Each Disbursement this Period 2000.00
City ANKENY State IA Zip Code 50021	011 Category/ Type	
Purpose of Disbursement		
Candidate Name JEFFREY LAMBERTI		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MARK KENNEDY FOR CONGRESS</b>		<b>Transaction ID: SB23.5330</b> Date of Disbursement 05 / 10 / 2006
Mailing Address PO Box 49333		Amount of Each Disbursement this Period 1000.00
City Blaine State MN Zip Code 55449	011 Category/ Type	
Purpose of Disbursement		
Candidate Name MARK RAYMOND KENNEDY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. PORTER FOR CONGRESS</b>		<b>Transaction ID: SB23.5329</b> Date of Disbursement 05 / 10 / 2006
Mailing Address PO Box 26087		Amount of Each Disbursement this Period 1500.00
City Las Vegas State NV Zip Code 89126	011 Category/ Type	
Purpose of Disbursement		
Candidate Name JON C SR PORTER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. PRYCE FOR CONGRESS</b>		Transaction ID: SB23.5342 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 145 E. Rich Street		Amount of Each Disbursement this Period 2000.00
City Columbus State OH Zip Code 43215	Purpose of Disbursement 011 Category/Type	
Candidate Name DEBORAH D. PRYCE		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. RAY MEIER FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.5373 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6
Mailing Address PO BOX 120		Amount of Each Disbursement this Period 2000.00
City UTICA State NY Zip Code 13503	Purpose of Disbursement 011 Category/Type	
Candidate Name RAYMOND A MEIER		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. RICHARD POMBO FOR CONGRESS</b>		Transaction ID: SB23.5352 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 2150 RIVER PLAZA DR. #150 SUITE 1560		Amount of Each Disbursement this Period 5000.00
City SACRAMENTO State CA Zip Code 95833	Purpose of Disbursement 011 Category/Type	
Candidate Name RICHARD POMBO		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PAC

Full Name (Last, First, Middle Initial) <b>A. SIMMONS FOR CONGRESS</b>		<b>Transaction ID: SB23.5338</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address P.O. Box 268 Drawer 271 P.O. Box 268 Drawer 271		Amount of Each Disbursement this Period 2000.00
City Stonington State CT Zip Code 06378	Purpose of Disbursement 011 Category/Type	
Candidate Name ROBERT R SIMMONS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. THELMA DRAKE FOR CONGRESS</b>		<b>Transaction ID: SB23.5333</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address PO BOX 61480		Amount of Each Disbursement this Period 1000.00
City VIRGINIA BEACH State VA Zip Code 23466	Purpose of Disbursement 011 Category/Type	
Candidate Name THELMA DRAKE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. WHALEN FOR CONGRESS</b>		<b>Transaction ID: SB23.5382</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6
Mailing Address P. O. Box 750		Amount of Each Disbursement this Period 2000.00
City Bettendorf State IA Zip Code 52722	Purpose of Disbursement 011 Category/Type	
Candidate Name MICHAEL LOUIS WHALEN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	49500.00