

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

ADDRESS (number and street) P.O. BOX 1263  
 Check if different than previously reported. (ACC)  
ALEXANDRIA VA 22313

2. **FEC IDENTIFICATION NUMBER** C00408393  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 10 16 2007 in the State of MA

5. Covering Period 07 01 2007 through 11 05 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Theodore V. Koch

Signature of Treasurer Electronically Filed by Theodore V. Koch Date 11 09 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	1

D	D
0	5

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		10496.22
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	31375.58									
(c) Total Receipts (from Line 19) .....	3360.00	42186.70								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	34735.58	52682.92								
7. Total Disbursements (from Line 31) .....	24215.36	42162.70								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10520.22	10520.22								
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  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	1

D	D
0	5

Y	Y	Y	Y
2	0	0	7

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	3000.00	41396.70
(i) Itemized (use Schedule A) .....	360.00	790.00
(ii) Unitemized .....	3360.00	42186.70
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	3360.00	42186.70
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)) .....	3360.00	42186.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3360.00	42186.70

**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.....	8176.61	19123.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	8176.61	19123.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16038.75	23038.75
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))..	24215.36	42162.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	24215.36	42162.70

**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 .....	3360.00	42186.70
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3360.00	42186.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8176.61	19123.95
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8176.61	19123.95

**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 / 16
	<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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

**A.** Full Name (Last, First, Middle Initial)  
Nina Gatzoulis

Mailing Address 25 Rogers Street

City State Zip Code  
Dover NH 03820

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

Name of Employer Occupation  
University of New Hampshire Instructor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

Transaction ID: SA11A1.4352

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address 25 Rogers St

City State Zip Code  
Dover NH 03820

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

Name of Employer Occupation  
U.S. Navy Retired Electrical/Nuclear Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

Transaction ID: SA11A1.4348

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address 2938 Upton Street, NW

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation  
Self Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

Transaction ID: SA11A1.4350

Amount of Each Receipt this Period  
1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3000.00

**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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Full Name (Last, First, Middle Initial) <b>A. Aristotle</b>		<b>Transaction ID:</b> SB21B.4355 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 0 7
Mailing Address 205 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 423.00
City Washington State DC Zip Code 20003	Purpose of Disbursement PAC Credit Card Processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Aristotle</b>		<b>Transaction ID:</b> SB21B.4356 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 7
Mailing Address 205 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 71.00
City Washington State DC Zip Code 20003	Purpose of Disbursement PAC Credit Card Processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Aristotle</b>		<b>Transaction ID:</b> SB21B.4407 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 205 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 21.20
City Washington State DC Zip Code 20003	Purpose of Disbursement PAC Credit Card Processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	515.20
<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 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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Full Name (Last, First, Middle Initial) <b>A. Koch &amp; Hoos, LLC</b>		<b>Transaction ID: SB21B.4340</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 1154		Amount of Each Disbursement this Period 2582.25
City Alexandria State VA Zip Code 22313	Category/ Type	
Purpose of Disbursement PAC Accounting/Administrative Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Koch &amp; Hoos, LLC</b>		<b>Transaction ID: SB21B.4383</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 1154		Amount of Each Disbursement this Period 1991.70
City Alexandria State VA Zip Code 22313	Category/ Type	
Purpose of Disbursement PAC Accounting/Administrative Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Koch &amp; Hoos, LLC</b>		<b>Transaction ID: SB21B.4384</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 1154		Amount of Each Disbursement this Period 1137.50
City Alexandria State VA Zip Code 22313	Category/ Type	
Purpose of Disbursement PAC Accounting/Administrative Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5711.45
<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 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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Full Name (Last, First, Middle Initial) <b>A. Koch &amp; Hoos, LLC</b>		<b>Transaction ID: SB21B.4410</b> Date of Disbursement 10 / 23 / 2007
Mailing Address P.O. Box 1154		Amount of Each Disbursement this Period 879.44
City Alexandria State VA Zip Code 22313	Category/ Type	
Purpose of Disbursement PAC Accounting/Administrative Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. schererMedia</b>		<b>Transaction ID: SB21B.4394</b> Date of Disbursement 09 / 20 / 2007
Mailing Address 8340 Harness Shop Road		Amount of Each Disbursement this Period 289.00
City Gainesville State VA Zip Code 20155	Category/ Type	
Purpose of Disbursement PAC photos/press release/sign		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Tyler Business Services, Inc.</b>		<b>Transaction ID: SB21B.4367</b> Date of Disbursement 07 / 23 / 2007
Mailing Address 313 Hooff's Run Dr		Amount of Each Disbursement this Period 303.50
City Alexandria State VA Zip Code 22314	Category/ Type	
Purpose of Disbursement PAC Signs/Posters		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1471.94</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>7698.59</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 16

<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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Full Name (Last, First, Middle Initial) <b>A. American Hellenic Institute, Inc.</b>		<b>Transaction ID: SB23.4427</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 7
Mailing Address 1220 16th Street, NW		Amount of Each Disbursement this Period 300.00
City Washington State DC Zip Code 20036	Category/ Type	
Purpose of Disbursement Inkind - List Expense		
Candidate Name ILEANA ROS-LEHTINEN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BILIRAKIS FOR CONGRESS</b>		<b>Transaction ID: SB23.4395</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 7
Mailing Address 610 S BOULEVARD		Amount of Each Disbursement this Period 1000.00
City TAMPA State FL Zip Code 33606	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name GUS MICHAEL BILIRAKIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 09	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. COLEMAN FOR SENATE 08</b>		<b>Transaction ID: SB23.4370</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 7
Mailing Address 7300 HUDSON BLVD SUITE 270A		Amount of Each Disbursement this Period 1000.00
City ST PAUL State MN Zip Code 55128	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name NORM COLEMAN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2300.00
<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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Full Name (Last, First, Middle Initial) <b>A. Dean Scontras For Congress Campaign Committee</b>		<b>Transaction ID:</b> SB23.4400 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7
Mailing Address 629 Middle Rd		Amount of Each Disbursement this Period 1000.00
City Woolwich State ME Zip Code 04579	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name DEAN P SCONTRAS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Fred Thompson Inc.</b>		<b>Transaction ID:</b> SB23.4379 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 128349		Amount of Each Disbursement this Period 1000.00
City Nashville State TN Zip Code 37212-8349	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name FRED THOMPSON		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. HENRY E. BROWN JR. FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.4393 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 7
Mailing Address P. O. Box 61886		Amount of Each Disbursement this Period 1000.00
City North Charleston State SC Zip Code 29419	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name HENRY E JR. E BROWN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Full Name (Last, First, Middle Initial) <b>A. HILLARY CLINTON FOR PRESIDENT</b>		<b>Transaction ID: SB23.4380</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2007
Mailing Address PO BOX 101436		Amount of Each Disbursement this Period 2300.00
City ARLINGTON State VA Zip Code 22210	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name HILLARY RODHAM CLINTON		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JOHN SARBANES FOR CONGRESS</b>		<b>Transaction ID: SB23.4403</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2007
Mailing Address PO Box 6854		Amount of Each Disbursement this Period 1000.00
City Towson State MD Zip Code 21285	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name JOHN P MR. SARBANES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 3	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MARTINEZ FOR SENATE</b>		<b>Transaction ID: SB23.4378</b> Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2007
Mailing Address 610 S BOULEVARD		Amount of Each Disbursement this Period 1000.00
City TAMPA State FL Zip Code 33606	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name MEL MARTINEZ		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4300.00
<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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Full Name (Last, First, Middle Initial) <b>A. NIKI TSONGAS COMMITTEE, THE</b>		<b>Transaction ID: SB23.4406</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2007
Mailing Address PO BOX 1454		Amount of Each Disbursement this Period 1000.00
City LOWELL State MA Zip Code 01853	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name NICOLA S TSONGAS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 05	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General	

Full Name (Last, First, Middle Initial) <b>B. NIKI TSONGAS COMMITTEE, THE</b>		<b>Transaction ID: SB23.4408</b> Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2007
Mailing Address PO BOX 1454		Amount of Each Disbursement this Period 750.00
City LOWELL State MA Zip Code 01853	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name NICOLA S TSONGAS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 05	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General	

Full Name (Last, First, Middle Initial) <b>C. RICHARDSON FOR PRESIDENT INC.</b>		<b>Transaction ID: SB23.4387</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2007
Mailing Address PO BOX 26208		Amount of Each Disbursement this Period 500.00
City ALBUQUERQUE State NM Zip Code 87125	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name BILL RICHARDSON		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2250.00
<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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Full Name (Last, First, Middle Initial) <b>A. ROS-LEHTINEN FOR CONGRESS</b>		Transaction ID: SB23.4419 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address P O Box 52-2784		Amount of Each Disbursement this Period 1000.00
City MIAMI State FL Zip Code 33152	Purpose of Disbursement Contribution Candidate Name ILEANA ROS-LEHTINEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 18	

Full Name (Last, First, Middle Initial) <b>B. RUDY GIULIANI PRESIDENTIAL COMMITTEE INC</b>		Transaction ID: SB23.4390 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 7
Mailing Address C/O JOHN GROSS PROSKAUER ROSE LLP 1585 BROADWAY		Amount of Each Disbursement this Period 800.00
City NEW YORK State NY Zip Code 10036	Purpose of Disbursement Contribution Candidate Name RUDOLPH W GIULIANI Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	

Full Name (Last, First, Middle Initial) <b>C. RUDY GIULIANI PRESIDENTIAL COMMITTEE INC</b>		Transaction ID: SB23.4391 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 7
Mailing Address C/O JOHN GROSS PROSKAUER ROSE LLP 1585 BROADWAY		Amount of Each Disbursement this Period 200.00
City NEW YORK State NY Zip Code 10036	Purpose of Disbursement Contribution Candidate Name RUDOLPH W GIULIANI Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2000.00
<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 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)  
GREEK AMERICAN POLITICAL ACTION COMMITTEE (GREEKPAC)

Full Name (Last, First, Middle Initial) <b>A. schererMedia</b>		Transaction ID: SB23.4425 Date of Disbursement 11 / 02 / 2007	
Mailing Address 8340 Harness Shop Road		Amount of Each Disbursement this Period 188.75	
City Gainesville State VA Zip Code 20155	Purpose of Disbursement Inkind - Invitation Design/Distribution	Category/ Type	
Candidate Name ILEANA ROS-LEHTINEN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. TIM JOHNSON FOR SOUTH DAKOTA INC</b>		Transaction ID: SB23.4368 Date of Disbursement 09 / 28 / 2007	
Mailing Address PO BOX 1859		Amount of Each Disbursement this Period 1000.00	
City SIOUX FALLS State SD Zip Code 57101	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name TIM JOHNSON	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.4392 Date of Disbursement 09 / 18 / 2007	
Mailing Address 123 West High Avenue		Amount of Each Disbursement this Period 1000.00	
City New Philadelphia State OH Zip Code 44663	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name ZACHARY T SPACE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2188.75</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>16038.75</b>

Image# 27990903748

Form/Schedule: **SB21B** Koch & Hoos LLC fees for administrative and accounting services are inclusive of personnel and office overhead costs to include rent, supplies, telephone service, utilities, and office equipment.  
Transaction ID: **SB21B.4340**

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