

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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
Mary Bono Mack Committee

ADDRESS (number and street) P.O. Box 3370
 Check if different than previously reported. (ACC)
Palm Springs CA 92263

2. **FEC IDENTIFICATION NUMBER** C00332890
CITY **STATE** **ZIP CODE**
STATE **DISTRICT**
CA 45

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 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2007 through 09 30 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 Meredith Kelley

Signature of Treasurer Electronically Filed by Meredith Kelley Date 05 22 2008

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

Mary Bono Mack Committee

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	119377.50	462635.70
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	7995.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	119377.50	454640.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	122813.48	510313.57
(b) Total Offsets to Operating Expenditures (from Line 14).....	1953.84	9016.33
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	120859.64	501297.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	194047.61	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Mary Bono Mack Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

50418.00

240996.00

(ii) Unitemized.....

39959.50

78039.70

(iii) TOTAL of contributions

90377.50

319035.70

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

29000.00

143600.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))

119377.50

462635.70

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

1953.84

9016.33

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

360.00

360.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

121691.34

472012.03

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	122813.48	510313.57
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	7595.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	400.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	7995.00
21. OTHER DISBURSEMENTS.....	1515.00	24715.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	124328.48	543023.57

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	196684.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	121691.34
25. SUBTOTAL (add Line 23 and Line 24).....	318376.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	124328.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	194047.61

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Jack A Adams

Mailing Address 43-595 Via Magellian

City State Zip Code
Palm Desert CA 92211

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

Name of Employer Self Occupation Accountant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2007

Transaction ID: 1187875661216

Amount of Each Receipt this Period
300.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Agua Caliente Band of Cahuilla Indians

Mailing Address 600 East Tahquitz Canyon Way

City State Zip Code
Palm Springs CA 92262

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2007

Transaction ID: 1189776584261

Amount of Each Receipt this Period
2300.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Agua Caliente Band of Cahuilla Indians

Mailing Address 600 East Tahquitz Canyon Way

City State Zip Code
Palm Springs CA 92262

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2007

Transaction ID: 1189776818204

Amount of Each Receipt this Period
1700.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **4300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Clarence Avant		Date of Receipt
	Mailing Address 1140 Maytor PL		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2007
	City	State	Zip Code
	Beverly Hills	CA	90210
	FEC ID number of contributing federal political committee. C		Transaction ID: 1191438113140
Name of Employer Interior Music		Occupation Owner	Amount of Each Receipt this Period 250.00
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Carol Baker		Date of Receipt
	Mailing Address 30573 Sunset Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2007
	City	State	Zip Code
	Redlands	CA	92373
	FEC ID number of contributing federal political committee. C		Transaction ID: 1190315875772
Name of Employer Self Employed		Occupation Interior Designer	Amount of Each Receipt this Period 200.00
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 400.00	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Mr. John R. Bernabucci, Jr		Date of Receipt
	Mailing Address P.O. Box 9377		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 13 / 2007
	City	State	Zip Code
	Fargo	ND	58106
	FEC ID number of contributing federal political committee. C		Transaction ID: 1188222368865
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period 500.00
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 91
(check only one)

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

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

<p>A. Full Name (Last, First, Middle Initial) Mrs. Emily Bourne</p> <p>Mailing Address 8 Wildhorse Ln</p> <p>City State Zip Code Rolling Hills CA 90274</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 414.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Transaction ID: 1190294635950</p> <p>Amount of Each Receipt this Period 113.00</p> <p>Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	7												

<p>B. Full Name (Last, First, Middle Initial) William Bramer</p> <p>Mailing Address 8 Cambridge CT</p> <p>City State Zip Code Rancho Mirage CA 92270</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Info requested Occupation Info requested</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Transaction ID: 1187270397864</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	0	7												

<p>C. Full Name (Last, First, Middle Initial) Charles L. Callander</p> <p>Mailing Address 74-125 Mockingbird Trail</p> <p>City State Zip Code Indian Wells CA</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Yellowstone Club Occupation Real Estate Sales</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Transaction ID: 1190305563218</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	7												

SUBTOTAL of Receipts This Page (optional)	613.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

<p>A. Full Name (Last, First, Middle Initial) Mr. Martin Cancienne</p> <p>Mailing Address 7075 Hwy 1 S PO Box 36</p> <p>City Belle Rose State LA Zip Code 70341</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Public relations</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2000.00</p>	<p>Date of Receipt 07 / 16 / 2007</p> <p>Transaction ID: 1184869683904</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Clarence Chamberlain</p> <p>Mailing Address 21055 George Brown Ave</p> <p>City Riverside State CA Zip Code 92518</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 375.00</p>	<p>Date of Receipt 08 / 13 / 2007</p> <p>Transaction ID: 1187876483768</p> <p>Amount of Each Receipt this Period 150.00</p> <p>Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Dean B. Cockerill</p> <p>Mailing Address 73-577 Minzah Way</p> <p>City Palm Desert State CA Zip Code 92260-5825</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 400.00</p>	<p>Date of Receipt 09 / 30 / 2007</p> <p>Transaction ID: 1191423901812</p> <p>Amount of Each Receipt this Period 150.00</p> <p>Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Howard Cohen

Mailing Address 10405 Sandringham Court

City Potomac State MD Zip Code 20854

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

Name of Employer HC Associates Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 07 / 16 / 2007

Transaction ID: 1184870032785

Amount of Each Receipt this Period 500.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Shelby Collinsworth

Mailing Address 1523 San Lorenzo St

City Palm Springs State CA Zip Code 92264

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

Name of Employer Info requested Occupation Info requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 13 / 2007

Transaction ID: 1187879170432

Amount of Each Receipt this Period 250.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mrs. Nancy Comaford

Mailing Address PO Box 2298

City Palos Verdes Penin State CA Zip Code 90274

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

Name of Employer SELF Occupation Artist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2007

Transaction ID: 1190984292712

Amount of Each Receipt this Period 150.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Daniel Crane

Mailing Address 8005 Lewisville RD

City State Zip Code
McLean VA 22102

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

Name of Employer Info requested Occupation Info requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 1184869809972

Amount of Each Receipt this Period
500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard Cromwell III

Mailing Address PO Box 1207

City State Zip Code
Desert Hot Springs CA 92240

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

Name of Employer Sunshine Transit Agency Occupation Gen'l Mgr/CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

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

Transaction ID: 1184859814230

Amount of Each Receipt this Period
225.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Jamil Dada

Mailing Address 1577 Crevasse

City State Zip Code
Riverside CA 92506-4807

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

Name of Employer Provident Bank Occupation Senior Financial Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 325.00

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

Transaction ID: 1185373615369

Amount of Each Receipt this Period
200.00

Credit Card
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **925.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 91
(check only one)

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

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
John L. Dawson

Mailing Address 5278 La Canada Blvd.

City State Zip Code
La Canada CA 91011

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: 1187876557219

Amount of Each Receipt this Period
150.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

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

Mailing Address 24881 Tigris LN

City State Zip Code
Hemet CA 92544

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

Name of Employer Info requested Occupation Info requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 7

Transaction ID: 1191418337400

Amount of Each Receipt this Period
500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Maryanne Donat

Mailing Address 10213 Eton Ave

City State Zip Code
Chatsworth CA 91311

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

Name of Employer Self Occupation Music Professor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 7

Transaction ID: 1191430559607

Amount of Each Receipt this Period
215.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **865.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Ray D Edwards
Mailing Address 110 La Cerra Drive
City Rancho Mirage State CA Zip Code 92270
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 425.00
Date of Receipt 09 / 11 / 2007
Transaction ID: 1190297673314
Amount of Each Receipt this Period 200.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Sharen Eskridge
Mailing Address 70-416 Placerville RD
City Rancho Mirage State CA Zip Code 92270
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Business
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 07 / 23 / 2007
Transaction ID: 1185888616045
Amount of Each Receipt this Period 1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dennis Fabozzi
Mailing Address 41530 Enterprise Circle S Suite 205
City Temecula State CA Zip Code 92590
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 08 / 13 / 2007
Transaction ID: 1187874183967
Amount of Each Receipt this Period 100.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 91
(check only one)

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

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)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial) Richard Fausel		Date of Receipt MM / DD / YYYY 09 / 11 / 2007
Mailing Address 39-700 Bob Hope DR Suite 216		Transaction ID: 1190303439087
City Rancho Mirage	State CA	Zip Code 92270
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Info requested	Occupation Info requested	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Mr Nicolas D Ferguson		Date of Receipt MM / DD / YYYY 07 / 12 / 2007
Mailing Address 26600 Kalmia Ave		Transaction ID: 1184858497234
City Moreno Valley	State CA	Zip Code 92555
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

C.

Full Name (Last, First, Middle Initial) Art L. Flaming		Date of Receipt MM / DD / YYYY 09 / 30 / 2007
Mailing Address 4437 Twain Avenue		Transaction ID: 1191439373459
City San Diego	State CA	Zip Code 92120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Tiena Corporation	Occupation Owner/President	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 425.00	

SUBTOTAL of Receipts This Page (optional)	▶	575.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 14 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Deena Flamson
Mailing Address 7 Rue Saint Cloud
City Newport Beach State CA Zip Code 92660
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 08 / 13 / 2007
Transaction ID: 1187893351259
Amount of Each Receipt this Period 500.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Kelly Flanagan
Mailing Address 45576 Kawea Way
City Indian Wells State CA Zip Code 92210
FEC ID number of contributing federal political committee. **C**
Name of Employer Prudential Occupation Realtor
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 445.00
Date of Receipt 09 / 30 / 2007
Transaction ID: 1191424969186
Amount of Each Receipt this Period 345.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Donald Forsythe
Mailing Address 5001 W FL Ave Spc. 412
City Hemet State CA Zip Code 92545
FEC ID number of contributing federal political committee. **C**
Name of Employer Info requested Occupation Info requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 08 / 13 / 2007
Transaction ID: 1187897271259
Amount of Each Receipt this Period 250.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1095.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Mr. Jerry Foster

Mailing Address 1565 Deer Crossing Dr

City State Zip Code
Diamond Bar CA 91765

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: 1187874503769

Amount of Each Receipt this Period
100.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Oliver Foster

Mailing Address 4131 Punta Alta DR

City State Zip Code
Los Angeles CA 90008

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

Name of Employer Info requested Occupation Info requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: 1188230492077

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Reuben L Gibney

Mailing Address 1476 S. San Joaquin Drive

City State Zip Code
Palm Springs CA 92264

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 7 / 2 0 0 7

Transaction ID: 1188240463931

Amount of Each Receipt this Period
400.00

Credit Card
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 91
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Lucie K. Gikovich

Mailing Address 514 Seward SQ SE

City State Zip Code
Washington DC 20003-1114

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

Name of Employer Occupation
Platinum Advisors Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 16 / 2007

Transaction ID: 1184869860535

Amount of Each Receipt this Period
500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Janet A. Gless

Mailing Address 1441 Ravenswood Lane

City State Zip Code
Riverside CA 92506

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

Name of Employer Occupation
Self Employed Rancher

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2007

Transaction ID: 1191437903947

Amount of Each Receipt this Period
300.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Jay Glick

Mailing Address 5951 Variel Av

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Occupation
Montgomery, Glick & Co. CPA

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2007

Transaction ID: 1187812117529

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Ewa Gosek
 Mailing Address PO Box 944
 City State Zip Code
 Palm Springs CA 92263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Info requested Occupation Info requested
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 3 0 / 2 0 0 7
Transaction ID: 1191425063979
 Amount of Each Receipt this Period
 165.00
 Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ewa Gosek
 Mailing Address PO Box 944
 City State Zip Code
 Palm Springs CA 92263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Info requested Occupation Info requested
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 3 0 / 2 0 0 7
Transaction ID: 1191425239174
 Amount of Each Receipt this Period
 65.00
 Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr John L Gregg
 Mailing Address P.O. Box 158
 City State Zip Code
 Verdugo City CA 91046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer info requested Occupation
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 1 / 2 0 0 7
Transaction ID: 1190298536635
 Amount of Each Receipt this Period
 200.00
 Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 430.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Myron C Gretler

Mailing Address 134 Miramar Ave

City State Zip Code
Santa Barbara CA 93108

FEC ID number of contributing federal political committee. C

Name of Employer Retired (Mobil Oil) Occupation Geologist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt MM / DD / YYYY
09 / 11 / 2007

Transaction ID: 1190315534787

Amount of Each Receipt this Period 450.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Wanda J. Hadlock

Mailing Address 11798 W. 14th Ave

City State Zip Code
Blythe CA 92225

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt MM / DD / YYYY
07 / 23 / 2007

Transaction ID: 1185886814411

Amount of Each Receipt this Period 300.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ann Hagerty

Mailing Address 26661 Las Ondas

City State Zip Code
Mission Viejo CA 92692

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt MM / DD / YYYY
09 / 30 / 2007

Transaction ID: 1191423931404

Amount of Each Receipt this Period 100.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Ann Hagerty
Mailing Address 26661 Las Ondas
City Mission Viejo State CA Zip Code 92692
FEC ID number of contributing federal political committee. C
Name of Employer Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt 09 / 30 / 2007
Transaction ID: 1191424999638
Amount of Each Receipt this Period 120.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
J. Steven Hart
Mailing Address 1155 21st Street NW Suite 300
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. C
Name of Employer Occupation Partner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt 09 / 30 / 2007
Transaction ID: 1191420679378
Amount of Each Receipt this Period 500.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mariann Hedstrom
Mailing Address 2018 Green Acres
City Visalia State CA Zip Code 93291
FEC ID number of contributing federal political committee. C
Name of Employer Occupation Owner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt 09 / 24 / 2007
Transaction ID: 1190987015325
Amount of Each Receipt this Period 215.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 835.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Jacqueline L. Houston	Date of Receipt MM / DD / YYYY 09 / 30 / 2007
	Mailing Address 345 N. Via Las Palmas	Transaction ID: 1191419554265
	City State Zip Code Palm Springs CA 92262	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

B.	Full Name (Last, First, Middle Initial) Jacqueline L. Houston	Date of Receipt MM / DD / YYYY 09 / 30 / 2007
	Mailing Address 345 N. Via Las Palmas	Transaction ID: 1191419937269
	City State Zip Code Palm Springs CA 92262	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

C.	Full Name (Last, First, Middle Initial) Mr. James Houston	Date of Receipt MM / DD / YYYY 09 / 30 / 2007
	Mailing Address 345 N. Via Las Palmas	Transaction ID: 1191420041780
	City State Zip Code Palm Springs CA 92262	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. C	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

SUBTOTAL of Receipts This Page (optional)	1600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Hubert Hudson	Date of Receipt MM / DD / YYYY 08 / 27 / 2007
	Mailing Address 260 Oak Hill	Transaction ID: 1188240686252
	City State Zip Code Watsonville CA 95076	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Credit Card <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer retired	Occupation retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Lynette R. Jacquez	Date of Receipt MM / DD / YYYY 07 / 16 / 2007
	Mailing Address 2403 Lellah Ct.	Transaction ID: 1184870299279
	City State Zip Code Dun Loring VA 22027	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Copeland, Lowery & Jacquez	Occupation Principal	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Carl N. Karcher	Date of Receipt MM / DD / YYYY 09 / 30 / 2007
	Mailing Address 112 Menil Place	Transaction ID: 1191438568401
	City State Zip Code Palm Desert CA 92260	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Info Requested	Occupation Info Requested	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 22 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Dan Kirby
Mailing Address 2 Riverview Heights
City State Zip Code
Sioux Falls SD 57105
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Kirby Financial LLC Investor
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2007
Transaction ID: 1184857208736
Amount of Each Receipt this Period
1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Garry Klef
Mailing Address 8295 S La Cienega Blvd
City State Zip Code
Inglewood CA 90301
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Info requested Info requested
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2007
Transaction ID: 1191424270014
Amount of Each Receipt this Period
2300.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr David G Klose
Mailing Address PO Box 11185
City State Zip Code
Palm Desert CA 92255-1185
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
New York Life Sales
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2007
Transaction ID: 1191334234884
Amount of Each Receipt this Period
1000.00
Credit Card
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 4300.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 23 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Koopman and Sons Dairy

Mailing Address 13898 South Archibald Ave

City State Zip Code
Ontario CA 91761-7979

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: 1187883876547

Amount of Each Receipt this Period
500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Gene Koopman

Mailing Address 13898 South Archibald Ave

City State Zip Code
Ontario CA 91761-7979

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

Name of Employer Occupation
Koopman and Sons Dairy Dairy Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: 1187884160850

Amount of Each Receipt this Period
500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Partnership contribution

C. Full Name (Last, First, Middle Initial)
Robert J. Lowe

Mailing Address 11777 San Vicente Blvd.
Suite 900

City State Zip Code
Los Angeles CA 90049

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

Name of Employer Occupation
Lowe Enterprises Inc. CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: 1187875237542

Amount of Each Receipt this Period
1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Sharon Lynch

Mailing Address PO Box 5005

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 27 / 2007

Transaction ID: 1201718409432

Amount of Each Receipt this Period 500.00

Credit Card
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Donna MacMillan

Mailing Address 74695 Wren DR

City Indian Wells State CA Zip Code 92210

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

Name of Employer N/A Occupation Housewife

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 09 / 30 / 2007

Transaction ID: 1191438496311

Amount of Each Receipt this Period 250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Luise Maddy

Mailing Address 255 N. El Cielo Rd. Ste. 545

City Palm Springs State CA Zip Code 92262

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

Name of Employer self Occupation Info Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2007

Transaction ID: 1191430866250

Amount of Each Receipt this Period 100.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 91
(check only one)

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

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Howard Marguleas

Mailing Address 837 Tahoe Blvd
Suite 210

City Incline Village State NV Zip Code 89451

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

Name of Employer Info requested Occupation Info requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2007

Transaction ID: 1191437340300

Amount of Each Receipt this Period 2000.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Ms. Rita C. Martin

Mailing Address 29 Evening Star Drive

City Rancho Mirage State CA Zip Code 92270-3463

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2007

Transaction ID: 1190314397713

Amount of Each Receipt this Period 1000.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Mr. Martin A. Match

Mailing Address PO Box 50000

City San Bernadino State CA Zip Code 92412

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

Name of Employer Match Corporation Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 08 / 13 / 2007

Transaction ID: 1187880047748

Amount of Each Receipt this Period 2300.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 5300.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Ms Camille D McCray

Mailing Address

City State Zip Code

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

Name of Employer N/A Occupation Unemployed

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: MM / DD / YYYY
08 / 13 / 2007

Transaction ID: 1188230165974

Amount of Each Receipt this Period: 250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3420 Lakeside View Drive

City State Zip Code
Falls Church VA 22041

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

Name of Employer Capitol Resources Occupation Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: MM / DD / YYYY
09 / 30 / 2007

Transaction ID: 1191420755125

Amount of Each Receipt this Period: 500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ms. Marian Miller

Mailing Address 58 Thise Ct.

City State Zip Code
Lafayette IN 47905

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

Name of Employer NFRW Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: MM / DD / YYYY
09 / 24 / 2007

Transaction ID: 1190987998952

Amount of Each Receipt this Period: 300.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
John W. Mitchell
Mailing Address 79308 Montego DR 16
City State Zip Code
Bermuda Dunes CA 92201
FEC ID number of contributing federal political committee. C
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
1035.00

Date of Receipt
09 / 11 / 2007
Transaction ID: 1190315494383
Amount of Each Receipt this Period
10.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Angelo Mozilo
Mailing Address 2816 Ladsbrook Way
City State Zip Code
Westlake Village CA 91361
FEC ID number of contributing federal political committee. C
Name of Employer Countrywide Occupation Banker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
1000.00

Date of Receipt
09 / 30 / 2007
Transaction ID: 1191438467359
Amount of Each Receipt this Period
500.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Leonard R. Olds
Mailing Address 2284 Temple Hills Dr.
City State Zip Code
Laguna Beach CA 92651
FEC ID number of contributing federal political committee. C
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
400.00

Date of Receipt
07 / 12 / 2007
Transaction ID: 1184855581127
Amount of Each Receipt this Period
200.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 710.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 91
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Charles M. Pasarell		Date of Receipt																				
	Mailing Address 78-200 Miles Ave.		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	9		3	0		2	0	0	7													
	City State Zip Code Indian Wells CA 92210		Transaction ID: 1191424014948																				
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00																				
Name of Employer Occupation PM Sports Management CEO		Check																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																					
Election Cycle-to-Date ▼ 500.00																							

B.	Full Name (Last, First, Middle Initial) Renona Pennington		Date of Receipt																				
	Mailing Address 1032 N Joyce Ave		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	8		1	3		2	0	0	7													
	City State Zip Code Rialto CA 92376		Transaction ID: 1187879584044																				
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00																				
Name of Employer Occupation Info requested Info requested		Check																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																					
Election Cycle-to-Date ▼ 250.00																							

C.	Full Name (Last, First, Middle Initial) Robert N Pyle		Date of Receipt																				
	Mailing Address 50225 Via Simpatico		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	9		1	1		2	0	0	7													
	City State Zip Code La Quinta CA 92253		Transaction ID: 1190315451635																				
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																				
Name of Employer Occupation Retired Retired		Check																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																					
Election Cycle-to-Date ▼ 510.00																							

SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Patricia Pyle		Date of Receipt MM / DD / YYYY 09 / 30 / 2007
	Mailing Address 50255 Via Simpatico		Transaction ID: 1191438428767
	City La Quinta	State CA	Zip Code 92253
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Retired	Occupation Retired	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) Byron Radaker		Date of Receipt MM / DD / YYYY 08 / 09 / 2007
	Mailing Address 74730 Fairway Dr		Transaction ID: 1186756504059
	City Palm Desert	State CA	Zip Code 92260
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Retired	Occupation Retired	Credit Card <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) David Hughes Rhodes		Date of Receipt MM / DD / YYYY 08 / 13 / 2007
	Mailing Address 81105 Muirfield Vlg		Transaction ID: 1187878919221
	City La Quinta	State CA	Zip Code 92253
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Insurance Service	Occupation Executive	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00
---	------------------------------------

SUBTOTAL of Receipts This Page (optional)	525.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Elise Richmond

Mailing Address 505 Camino Sur

City State Zip Code
Palm Springs CA 92262

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: 1190989063186

Amount of Each Receipt this Period
260.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robertson's

Mailing Address PO Box 3600

City State Zip Code
Corona CA 92878

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: 1187884393781

Amount of Each Receipt this Period
500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Richard Robertson

Mailing Address PO Box 3600

City State Zip Code
Corona CA 92878

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

Name of Employer Robertson's Occupation Info requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: 1187884446357

Amount of Each Receipt this Period
500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Partnership contribution.

SUBTOTAL of Receipts This Page (optional) ► **760.00**

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

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

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

FOR LINE NUMBER: PAGE 31 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
David Rose

Mailing Address 397 Red River RD

City State Zip Code
Palm Desert CA 92211

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

Name of Employer Melrose Industries Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: 1190725484468

Amount of Each Receipt this Period
250.00

Credit Card
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
ALFREDO SANDOVAL

Mailing Address 45510 OSAGE CT

City State Zip Code
INDIAN WELLS CA 92210

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

Name of Employer Creosote Partners Occupation Investor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

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

Transaction ID: 1184858577981

Amount of Each Receipt this Period
200.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Salt River PIMA-Maricopa Indian Comm.

Mailing Address 10005 E. Osborn Road

City State Zip Code
Scottsdale AZ 85256

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 3 / 2 0 0 7

Transaction ID: 1187884584243

Amount of Each Receipt this Period
2300.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Patricia Sandoval

Mailing Address 45510 Osage CT

City State Zip Code
Indian Wells CA 92210

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

Name of Employer Occupation
Boston Univ Instructor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: 1190989159619

Amount of Each Receipt this Period
280.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Frank Schetter

Mailing Address PO Box 1377

City State Zip Code
Sacramento CA 95812

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

Name of Employer Occupation
Info Requested Info Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 7

Transaction ID: 1191429654211

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
G. Aubrey Serfling

Mailing Address 73043 Galleria Ct.

City State Zip Code
Palm Desert CA 92260

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

Name of Employer Occupation
Eisenhower Medical Center CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 7

Transaction ID: 1191438648148

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **780.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 91
(check only one)

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

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)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Mark Shabashov

Mailing Address 44546 Mayberry Ave.

City State Zip Code
Hemet CA 92544-6617

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2007

Transaction ID: 1191420340940

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Maria Sheehan

Mailing Address 68 Via Bella

City State Zip Code
Rancho Mirage CA 92270

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2007

Transaction ID: 1191426875585

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mrs. Alexandra Sheldon

Mailing Address 10250 Sunset Boulevard

City State Zip Code
Los Angeles CA 90077

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2007

Transaction ID: 1190304015678

Amount of Each Receipt this Period
2300.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2800.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 91 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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)
Mary Bono Mack Committee

<p>A. Full Name (Last, First, Middle Initial) Mr. Jon A. Shoenberger</p> <p>Mailing Address 760 Sierra Way</p> <p>City State Zip Code Palm Springs CA 92264</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Schlecht, Shevlin, & Shoe- Attorney nbeuger</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 7</p> <p>Transaction ID: 1191422281510</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Barbara A. Sinatra</p> <p>Mailing Address 1880 Century Park East #1600</p> <p>City State Zip Code Los Angeles CA 90067</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Retired Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 3 / 2 0 0 7</p> <p>Transaction ID: 1187880195477</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Sharon Sitrin</p> <p>Mailing Address 520 Alma Real Drive</p> <p>City State Zip Code Pacific Palisades CA 90272</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Info requested Info requested</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">350.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 1 / 2 0 0 7</p> <p>Transaction ID: 1189799119960</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 91

(check only one)

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

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Ed Smith

Mailing Address PO Box 2212

City State Zip Code
Palm Springs CA 92263

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
07 / 23 / 2007

Transaction ID: 1185889053122

Amount of Each Receipt this Period 500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Mark V. Sofonio

Mailing Address 39000 Bob Hope Drive

City State Zip Code
Rancho Mirage CA 92270

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self Employed Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
08 / 29 / 2007

Transaction ID: 1188397551626

Amount of Each Receipt this Period 1000.00

Credit Card
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Thelma Stewart

Mailing Address 1067 Bristol

City State Zip Code
Stockton CA 95204

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt MM / DD / YYYY
09 / 24 / 2007

Transaction ID: 1190989361454

Amount of Each Receipt this Period 150.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 91

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Ms. Gloria Stroschein

Mailing Address P.O. Box 1030

City State Zip Code
Blythe CA 92226-1030

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

Name of Employer Occupation
Self Employed Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

3050.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2007

Transaction ID: 1191439091190

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Frederic E. Supple, Jr.

Mailing Address 2100 E Tahquitz Canyon Way

City State Zip Code
Palm Springs CA 92262

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

Name of Employer Occupation
KPSL/KDES Radio Corp. Investor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2007

Transaction ID: 1190314612719

Amount of Each Receipt this Period
800.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Frederic E. Supple, Jr.

Mailing Address 2100 E Tahquitz Canyon Way

City State Zip Code
Palm Springs CA 92262

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

Name of Employer Occupation
KPSL/KDES Radio Corp. Investor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2007

Transaction ID: 1190314656108

Amount of Each Receipt this Period
200.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 91

(check only one)

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

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Steven G. Tilton

Mailing Address 7127 Maple Avenue

City State Zip Code
Takoma Park MD 20912

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
PHRMA Sr Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 1184869950550

Amount of Each Receipt this Period 500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
David N.M. Turch

Mailing Address 517 2nd St NE

City State Zip Code
Washington DC 20002

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
David Turch & Associates Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 1184870342825

Amount of Each Receipt this Period 1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Lorriane Turner

Mailing Address 2891 east 7375 South

City State Zip Code
Salt Lake City UT 84121

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 280.00

Date of Receipt M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: 1190989237350

Amount of Each Receipt this Period 280.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1780.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 91

(check only one)

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

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Helen Turner

Mailing Address 44834 Doral DR

City State Zip Code
Indian Wells CA 92210

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 250.00

Date of Receipt M M / D D / Y Y Y Y
09 / 30 / 2007

Transaction ID: 1191438614774

Amount of Each Receipt this Period 50.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Dennis Ullrich

Mailing Address 1430 Richman Knoll

City State Zip Code
Fullerton CA 92835

FEC ID number of contributing federal political committee. C

Name of Employer Hydraflow Occupation President

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 2000.00

Date of Receipt M M / D D / Y Y Y Y
07 / 23 / 2007

Transaction ID: 1185887657691

Amount of Each Receipt this Period 1000.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

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

Mailing Address PO Box 970

City State Zip Code
Thousand Palms CA 92276

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Executive

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 1950.00

Date of Receipt M M / D D / Y Y Y Y
09 / 30 / 2007

Transaction ID: 1191420142651

Amount of Each Receipt this Period 250.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1300.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Mr. R. T. Walker		Date of Receipt MM / DD / YYYY 08 / 13 / 2007
	Mailing Address 8154 College Avenue		Transaction ID: 1187874338196
	City Whittier	State CA	Zip Code 90605
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	Name of Employer Info Requested	Occupation Info Requested	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00		

B.	Full Name (Last, First, Middle Initial) Thomas P. Walters		Date of Receipt MM / DD / YYYY 08 / 13 / 2007
	Mailing Address 3808 Colonial Avenue		Transaction ID: 1187874964035
	City Alexandria	State VA	Zip Code 22309
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Info Requested Thomas Walters & Assoc	Occupation Info Requested Govt Relations	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Mr. James A. Willingham		Date of Receipt MM / DD / YYYY 09 / 11 / 2007
	Mailing Address 615 Edith Way		Transaction ID: 1190298403125
	City Long Beach	State CA	Zip Code 90806
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Info requested	Occupation Info requested	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1750.00		

SUBTOTAL of Receipts This Page (optional)	▶	1575.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 40 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Dr. S. Roy Wilson

Mailing Address 72-825 Bel Air Rd

City State Zip Code
Palm Desert CA 92260

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt

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

Transaction ID: 1185886736930

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Michael W Woods

Mailing Address 38384 Via Roberta

City State Zip Code
Palm Springs CA 92264

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

Name of Employer Campo Enterprises, Inc. Occupation Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt

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

Transaction ID: 1190298601382

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John Works

Mailing Address 24889 W Acacia Ave

City State Zip Code
Hemet CA 92545

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

Name of Employer Info requested Occupation Info requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	3	/	2	0	0	7

Transaction ID: 1187877656559

Amount of Each Receipt this Period
150.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 91

(check only one)

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

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)

Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)

John Works

Mailing Address 24889 W Acacia Ave

City State Zip Code
Hemet CA 92545

FEC ID number of contributing federal political committee.

C

Name of Employer Info requested

Occupation Info requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2007

Transaction ID: 1191439038333

Amount of Each Receipt this Period

100.00

Check

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr Greg D. Young

Mailing Address 38305 N. Jefferson St.

City State Zip Code
Indio CA 92203-9427

FEC ID number of contributing federal political committee.

C

Name of Employer Cocopah Nurseries

Occupation Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1700.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: 1189450824304

Amount of Each Receipt this Period

200.00

Credit Card

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

50418.00

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

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

FOR LINE NUMBER: PAGE 42 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Abbott Laboratories EmployeePAC
Mailing Address 100 Abbott Park Road
City State Zip Code
Abbott Park IL 60064
FEC ID number of contributing federal political committee. **C** C00040279
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7
Transaction ID: 1187874641889
Amount of Each Receipt this Period
1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Hospital Association PAC
Mailing Address 325 Seventh Street NW
Suite 700
City State Zip Code
Washington DC 20004
FEC ID number of contributing federal political committee. **C** C00106146
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 2 / 2 0 0 7
Transaction ID: 1184868766324
Amount of Each Receipt this Period
2000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Occupational Therapy Assoc. Inc. PAC
Mailing Address 4720 Montgomery Lane
City State Zip Code
Bethesda MD 20824
FEC ID number of contributing federal political committee. **C** C00089086
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 7
Transaction ID: 1191420427811
Amount of Each Receipt this Period
1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 43 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
American Podiatric Medical Assoc. PAC

Mailing Address 9312 Old Georgetown Road

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 1184868966457

Amount of Each Receipt this Period
1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
CTIA PAC

Mailing Address 1400 16th ST, NW Suite 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00262295

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 1184869556131

Amount of Each Receipt this Period
1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Council for Responsible Nutrition PAC

Mailing Address 1828 L Street NW Suite 900

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00399659

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 3 0 / 2 0 0 7

Transaction ID: 1191420646630

Amount of Each Receipt this Period
1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Deloitte & Touche PAC
Mailing Address P.O. Box 365
City Washington State DC Zip Code 20044
FEC ID number of contributing federal political committee. **C** C00211318
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 09 / 30 / 2007
Transaction ID: 1191420220070
Amount of Each Receipt this Period 1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Federal Express PAC
Mailing Address 942 S. Shady Grove Road
City Memphis State TN Zip Code 38120
FEC ID number of contributing federal political committee. **C** C00068692
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00
Date of Receipt 07 / 23 / 2007
Transaction ID: 1185889788811
Amount of Each Receipt this Period 1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Florida Power & Light Co. Employees PAC
Mailing Address 700 Universe Blvd.
PO Box 14000
City Juno Beach State FL Zip Code 33408
FEC ID number of contributing federal political committee. **C** C00064774
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 07 / 12 / 2007
Transaction ID: 1188312200533
Amount of Each Receipt this Period 1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Florida Power & Light Co. Employees PAC

Mailing Address 700 Universe Blvd.
PO Box 14000

City Juno Beach State FL Zip Code 33408

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2007
Transaction ID: 1191420294817
 Amount of Each Receipt this Period 1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Holland America Line Inc. PAC

Mailing Address 300 Elliott Avenue W

City Seattle State WA Zip Code 98119

FEC ID number of contributing federal political committee. **C** C00287714

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 11 / 2007
Transaction ID: 1190294709728
 Amount of Each Receipt this Period 500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Honeywell International PAC

Mailing Address 1001 Pennsylvania Avenue
Suite 700

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 13 / 2007
Transaction ID: 1187874687060
 Amount of Each Receipt this Period 1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Log Cabin Republicans PAC

Mailing Address 1101 14th St. NW
Suite 1040

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00405506

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2007
Transaction ID: 1191424415055
 Amount of Each Receipt this Period 500.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Microsoft Corporation PAC

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 23 / 2007
Transaction ID: 1185889901512
 Amount of Each Receipt this Period 1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NFIB Safe Trust

Mailing Address 1201 F Street
Suite200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2007
Transaction ID: 1191420261522
 Amount of Each Receipt this Period 1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Association PAC
Mailing Address 1325 Massachusetts Avenue NW
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00238725
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt 09 / 30 / 2007
Transaction ID: 1191420514354
Amount of Each Receipt this Period 1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Association of Health Underwriters PAC
Mailing Address 2000 North 14th Street Suite 450
City Arlington State VA Zip Code 22201
FEC ID number of contributing federal political committee. **C** C00283135
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 09 / 30 / 2007
Transaction ID: 1191420832465
Amount of Each Receipt this Period 1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Association of Home Builders PAC
Mailing Address 1201 15th Street NW
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00000901
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 09 / 11 / 2007
Transaction ID: 1189779927169
Amount of Each Receipt this Period 1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
National Emergency Medicine PAC
Mailing Address PO Box 619911
City Dallas State TX Zip Code 75261
FEC ID number of contributing federal political committee. **C** C00140061
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00
Date of Receipt 09 / 30 / 2007
Transaction ID: 1191420471184
Amount of Each Receipt this Period 1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Nuclear Energy Institute Federal PAC
Mailing Address 1776 I Street, N.W. Suite 400
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00239848
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 07 / 12 / 2007
Transaction ID: 1184868872632
Amount of Each Receipt this Period 1000.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Pharmavite LLC PAC
Mailing Address 8510 Balboa Blvd.
City Northridge State CA Zip Code 91325
FEC ID number of contributing federal political committee. **C** C00410654
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 07 / 23 / 2007
Transaction ID: 1185889937531
Amount of Each Receipt this Period 500.00
Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
PriceWaterhouseCoopers PAC

Mailing Address 1900 K Street, NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2007
Transaction ID: 1191420391126
 Amount of Each Receipt this Period 2000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Realtors PAC

Mailing Address 430 N. Michigan Avenue

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2007
Transaction ID: 1191420721267
 Amount of Each Receipt this Period 1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Tuesday Group PAC

Mailing Address PO Box 40385

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 13 / 2007
Transaction ID: 1187884910717
 Amount of Each Receipt this Period 2000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 91
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial)
Tuesday Group PAC

Mailing Address PO Box 40385

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.00

Date of Receipt 08 / 16 / 2007
Transaction ID: 1192499020041

Amount of Each Receipt this Period -2000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Universal Music Group PAC

Mailing Address P.O. Box 31756

City Charlotte State NC Zip Code 28234

FEC ID number of contributing federal political committee. **C** C00392464

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 07 / 23 / 2007
Transaction ID: 1185889756432

Amount of Each Receipt this Period 1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ven-PAC

Mailing Address PO Box 83142

City Gaithersburg State MD Zip Code 20883

FEC ID number of contributing federal political committee. **C** C00369660

Name of Employer Occupation
Info Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 16 / 2007
Transaction ID: 1184870235203

Amount of Each Receipt this Period 1000.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 91
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Wal-mart Stores, Inc. PAC for Responsible Gov't

Mailing Address 702 SW 8th Street

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2007

Transaction ID: 1191420601460

Amount of Each Receipt this Period 1000.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
WineandSpirits WholesalersofAmerica PAC

Mailing Address 805 Fifteenth Street NW Suite 430

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 09 / 30 / 2007

Transaction ID: 1191420787905

Amount of Each Receipt this Period 2500.00

Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	29000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 52 / 91	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15

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) Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial) Capitol Hill Club		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2007
Mailing Address 300 First Street, SE		Transaction ID: 1192499639342
City Washington	State DC	Zip Code 20515
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1953.84
Name of Employer	Occupation	Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1953.84	refund for overpayment

SUBTOTAL of Receipts This Page (optional)	1953.84
TOTAL This Period (last page this line number only)	1953.84

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 53 / 91	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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) Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial) Rudy Giuliani Presidential Committee		Date of Receipt MM / DD / YYYY 09 / 18 / 2007
Mailing Address 1585 BROADWAY		Transaction ID: 1192505258075
City State Zip Code New York NY 10036	FEC ID number of contributing federal political committee. C C00430512	Amount of Each Receipt this Period 360.00
Name of Employer	Occupation	In-kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 360.00	in-kind: email to campaign list

SUBTOTAL of Receipts This Page (optional)	▶	360.00
TOTAL This Period (last page this line number only)	▶	360.00

SCHEDULE B (FEC Form 3) 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"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) AT and T Mailing Address PO Box 51471 City Los Angeles State CA Zip Code 90051 Purpose of Disbursement Cell phone service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1190990338769 Date of Disbursement 09 / 27 / 2007 Amount of Each Disbursement this Period 419.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Arthur J. Finkelstein & Associates Mailing Address 16 North Astor City Irvington State NY Zip Code 10533 Purpose of Disbursement Political Consulting fees Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1186059631025 Date of Disbursement 08 / 02 / 2007 Amount of Each Disbursement this Period 4329.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Arthur J. Finkelstein & Associates Mailing Address 16 North Astor City Irvington State NY Zip Code 10533 Purpose of Disbursement Political Consulting fees Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1188564915647 Date of Disbursement 08 / 31 / 2007 Amount of Each Disbursement this Period 4659.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

9408.81

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 1184851296762 Date of Disbursement 07 / 18 / 2007
	Mailing Address P.O. Box 3530	Amount of Each Disbursement this Period 1150.41
	City Rancho Cordova State CA Zip Code 95741-3530	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit card charges- see below Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) AOL On-Line Service	Transaction ID: 1184851547784 Date of Disbursement 07 / 18 / 2007
	Mailing Address 4892 First Coast Tech Parkway	Amount of Each Disbursement this Period 22.85
	City Jacksonville State FL Zip Code 32224	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Internet service Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

[MEMO ITEM]
See check #5679 \$1150.41 to Business card 7/18/07.

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 1184851479912 Date of Disbursement 07 / 18 / 2007
	Mailing Address P.O. Box 3530	Amount of Each Disbursement this Period 5.73
	City Rancho Cordova State CA Zip Code 95741-3530	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Finance charge Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

[MEMO ITEM]
See check #5679 \$1150.41 to Business card 7/18/07.

SUBTOTAL of Disbursements This Page (optional)	▶	1150.41
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Best Buy	Transaction ID: 1184852704677
	Mailing Address 44-449 Town Center Way	Date of Disbursement 07 / 18 / 2007
	City Palm Desert State CA Zip Code 92260	Amount of Each Disbursement this Period 29.00
	Purpose of Disbursement Office supplies Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] See check #5679 \$1150.41 to Business card 7/18/07.
	Disbursement For: 008" <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Cardinal Promotions	Transaction ID: 1184852792408
	Mailing Address 68-895 Perez Road Suite 16	Date of Disbursement 07 / 18 / 2007
	City Cathedral City State CA Zip Code 92234	Amount of Each Disbursement this Period 89.06
	Purpose of Disbursement Office supplies Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] See check #5679 \$1150.41 to Business card 7/18/07.
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Cingular Wireless	Transaction ID: 1184851788634
	Mailing Address PO Box 772349	Date of Disbursement 07 / 18 / 2007
	City Ocala State FL Zip Code 34477	Amount of Each Disbursement this Period 86.72
	Purpose of Disbursement Cell phone service Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] See check #5679 \$1150.41 to Business card 7/18/07.
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
House Members Restaurant

Mailing Address unknown

City Washington State DC Zip Code 20036

Purpose of Disbursement
Event food/bev
Candidate Name

007
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 1184854325644
Date of Disbursement

07 / 18 / 2007

Amount of Each Disbursement this Period

278.28

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
See check

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 350 S. Palm Canyon Drive

City Palm Springs State CA Zip Code 92262

Purpose of Disbursement
Office supplies
Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 1184852960085
Date of Disbursement

07 / 18 / 2007

Amount of Each Disbursement this Period

126.47

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
See check

C.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address P.O. Box 3530

City Rancho Cordova State CA Zip Code 95741-3530

Purpose of Disbursement
Merchant
Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 1184870853464
Date of Disbursement

07 / 01 / 2007

Amount of Each Disbursement this Period

26.58

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

26.58

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

SCHEDULE B (FEC Form 3) 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"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 3530 City Rancho Cordova State CA Zip Code 95741-3530 Purpose of Disbursement Credit card charges- see below Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1188240312889 Date of Disbursement 08 / 16 / 2007 Amount of Each Disbursement this Period 1059.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) AOL On-Line Service Mailing Address 4892 First Coast Tech Parkway City Jacksonville State FL Zip Code 32224 Purpose of Disbursement Internet service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1191336254452 Date of Disbursement 08 / 06 / 2007 Amount of Each Disbursement this Period 22.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] See Business card ck #5718 \$1059.95
C.	Full Name (Last, First, Middle Initial) Cingular Wireless Mailing Address 17330 Preston Road Suite 100A City Dallas State TX Zip Code 75252 Purpose of Disbursement Cell phone service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1191336503192 Date of Disbursement 08 / 06 / 2007 Amount of Each Disbursement this Period 86.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] See Business card ck #5718 \$1059.95

SUBTOTAL of Disbursements This Page (optional) ▶

1059.95

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car	Transaction ID: 1191336394556
	Mailing Address 207 E. Kearney St.	Date of Disbursement 07 / 31 / 2007
	City Springfield State MO Zip Code 65804	Amount of Each Disbursement this Period 10.75
	Purpose of Disbursement Parking Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] See Business card ck #5718 \$1059.95
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 1191336893487
	Mailing Address 350 S. Palm Canyon Drive	Date of Disbursement 07 / 27 / 2007
	City Palm Springs State CA Zip Code 92262	Amount of Each Disbursement this Period 665.15
	Purpose of Disbursement Office supplies Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] See Business card ck #5718 \$1059.95
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 1188303408236
	Mailing Address P.O. Box 3530	Date of Disbursement 08 / 01 / 2007
	City Rancho Cordova State CA Zip Code 95741-3530	Amount of Each Disbursement this Period 29.20
	Purpose of Disbursement Merchant fees Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	29.20
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) 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"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 3530 City Rancho Cordova State CA Zip Code 95741-3530 Purpose of Disbursement CC Charges- see below Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1191337304734 Date of Disbursement 09 / 27 / 2007 Amount of Each Disbursement this Period 543.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) AOL On-Line Service Mailing Address 4892 First Coast Tech Parkway City Jacksonville State FL Zip Code 32224 Purpose of Disbursement Credit over-charge of internet service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1191338130322 Date of Disbursement 07 / 30 / 2007 Amount of Each Disbursement this Period -19.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] See Business card ck #5757 \$543.20
C.	Full Name (Last, First, Middle Initial) AOL On-Line Service Mailing Address 4892 First Coast Tech Parkway City Jacksonville State FL Zip Code 32224 Purpose of Disbursement Internet service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1191337453243 Date of Disbursement 08 / 22 / 2007 Amount of Each Disbursement this Period 6.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] See Business card ck #5757 \$543.20

SUBTOTAL of Disbursements This Page (optional) ▶	543.20
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 1191337915581
	Mailing Address 350 S. Palm Canyon Drive	Date of Disbursement 08 / 13 / 2007
	City Palm Springs State CA Zip Code 92262	Amount of Each Disbursement this Period 370.37
	Purpose of Disbursement Office supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	001 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] See Business card ck #5757 \$543.20
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 1191338200100
	Mailing Address PO Box 9622	Date of Disbursement 08 / 20 / 2007
	City Mission Hills State CA Zip Code 91346	Amount of Each Disbursement this Period 24.01
	Purpose of Disbursement Cell phone service	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	001 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] See Business card ck #5757 \$543.20
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 1191338374967
	Mailing Address P.O. Box 3530	Date of Disbursement 09 / 27 / 2007
	City Rancho Cordova State CA Zip Code 95741-3530	Amount of Each Disbursement this Period 287.96
	Purpose of Disbursement CC Charges- see below	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	001 Category/Type
	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: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	287.96
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 1191338450511 Date of Disbursement 09 / 03 / 2007
	Mailing Address P.O. Box 3530	Amount of Each Disbursement this Period 135.00
	City Rancho Cordova State CA Zip Code 95741-3530	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement Annual fees Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] See Business card ck #5758 \$287.96
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Postnet	Transaction ID: 1191338633893 Date of Disbursement 09 / 06 / 2007
	Mailing Address 767 E. Monte Vista Ave.	Amount of Each Disbursement this Period 109.01
	City Valencia State CA Zip Code 91354	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement Postage/shipping Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] See Business card ck #5758 \$287.96
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 1215121802663 Date of Disbursement 08 / 31 / 2007
	Mailing Address P.O. Box 3530	Amount of Each Disbursement this Period 84.34
	City Rancho Cordova State CA Zip Code 95741-3530	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement merchant fees Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	84.34
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group Mailing Address 815 Slaters Lane City Alexandria State VA Zip Code 22314 Purpose of Disbursement Printing & shipping Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1184850701660 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 62.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group Mailing Address 815 Slaters Lane City Alexandria State VA Zip Code 22314 Purpose of Disbursement Printing & shipping Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1185825358472 Date of Disbursement 07 / 27 / 2007 Amount of Each Disbursement this Period 11.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group Mailing Address 815 Slaters Lane City Alexandria State VA Zip Code 22314 Purpose of Disbursement Fundraising, faxing, printing & shipping Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1185973334734 Date of Disbursement 07 / 31 / 2007 Amount of Each Disbursement this Period 7354.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	7428.07
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: 1186510390463 Date of Disbursement 08 / 07 / 2007
	Mailing Address 815 Slaters Lane	Amount of Each Disbursement this Period 3820.00
	City Alexandria State VA Zip Code 22314	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement Fundraising, faxing, printing & shipping Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: 1189447603547 Date of Disbursement 09 / 07 / 2007
	Mailing Address 815 Slaters Lane	Amount of Each Disbursement this Period 1205.12
	City Alexandria State VA Zip Code 22314	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement Fundraising, faxing, printing & shipping Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: 1190990664036 Date of Disbursement 09 / 27 / 2007
	Mailing Address 815 Slaters Lane	Amount of Each Disbursement this Period 45.20
	City Alexandria State VA Zip Code 22314	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement Fundraising, faxing, printing & shipping Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

5070.32

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Bieber Communications

Transaction ID: 1190384030556
Date of Disbursement

Mailing Address 3605 W. MacArthur Boulevard
Ste. 712

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

City Santa Ana State CA Zip Code 92704

Amount of Each Disbursement this Period

4381.30

Purpose of Disbursement
Printing/mailling services

001

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Cardinal Promotions

Transaction ID: 1189447532081
Date of Disbursement

Mailing Address 68-895 Perez Road
Suite 16

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

City Cathedral City State CA Zip Code 92234

Amount of Each Disbursement this Period

1093.19

Purpose of Disbursement
Campaign badges

006

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Cingular Wireless

Transaction ID: 1184851046584
Date of Disbursement

Mailing Address PO Box 772349

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	0	7

City Ocala State FL Zip Code 34477

Amount of Each Disbursement this Period

151.99

Purpose of Disbursement
Cell phone service

001

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5626.48

TOTAL This Period (last page this line number only)

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**SCHEDULE B (FEC Form 3)
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"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Complete Campaigns

Full Name (Last, First, Middle Initial)
Mary Bono Mack Committee

Transaction ID: 1183489761462
Date of Disbursement: 07 / 03 / 2007

Mailing Address: 610 Gateway Center Way, Suite K
City: San Diego, State: CA, Zip Code: 92102

Purpose of Disbursement: Data import service
Candidate Name: []
Category/Type: 001

Office Sought: House, Senate, President
Disbursement For: 2008
 Primary, General, Other (specify) ▼

State: [], District: []

Amount of Each Disbursement this Period: 500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Complete Campaigns

Full Name (Last, First, Middle Initial)
Mary Bono Mack Committee

Transaction ID: 1184871954562
Date of Disbursement: 07 / 19 / 2007

Mailing Address: 610 Gateway Center Way, Suite K
City: San Diego, State: CA, Zip Code: 92102

Purpose of Disbursement: Data import service
Candidate Name: []
Category/Type: 001

Office Sought: House, Senate, President
Disbursement For: 2008
 Primary, General, Other (specify) ▼

State: [], District: []

Amount of Each Disbursement this Period: 500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Complete Campaigns

Full Name (Last, First, Middle Initial)
Mary Bono Mack Committee

Transaction ID: 1185809480597
Date of Disbursement: 07 / 27 / 2007

Mailing Address: 610 Gateway Center Way, Suite K
City: San Diego, State: CA, Zip Code: 92102

Purpose of Disbursement: Monthly data import service fee
Candidate Name: []
Category/Type: 001

Office Sought: House, Senate, President
Disbursement For: 2008
 Primary, General, Other (specify) ▼

State: [], District: []

Amount of Each Disbursement this Period: 200.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ► **1200.00**

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Complete Campaigns	Full Name (Last, First, Middle Initial)	Transaction ID: 1186664661817	
	Mailing Address	Date of Disbursement	
	610 Gateway Center Way Suite K	MM / DD / YYYY 08 / 09 / 2007	
	City State Zip Code	Amount of Each Disbursement this Period	
	San Diego CA 92102	200.00	
	Purpose of Disbursement	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Monthly data import service fee	001	
	Candidate Name	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2008	
	<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
	State: District:		

B. Complete Campaigns	Full Name (Last, First, Middle Initial)	Transaction ID: 1189107976301	
	Mailing Address	Date of Disbursement	
	610 Gateway Center Way Suite K	MM / DD / YYYY 09 / 06 / 2007	
	City State Zip Code	Amount of Each Disbursement this Period	
	San Diego CA 92102	500.00	
	Purpose of Disbursement	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Data import service	001	
	Candidate Name	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2008	
	<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
	State: District:		

C. Complete Campaigns	Full Name (Last, First, Middle Initial)	Transaction ID: 1189522855462	
	Mailing Address	Date of Disbursement	
	610 Gateway Center Way Suite K	MM / DD / YYYY 09 / 11 / 2007	
	City State Zip Code	Amount of Each Disbursement this Period	
	San Diego CA 92102	200.00	
	Purpose of Disbursement	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Data import service	001	
	Candidate Name	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2008	
	<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Complete Campaigns

Transaction ID: 1190983771064
Date of Disbursement

Mailing Address 610 Gateway Center Way
Suite K

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	7	7

City San Diego State CA Zip Code 92102

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Data import service

001

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
David L. Andrukitis

Transaction ID: 1184850482934
Date of Disbursement

Mailing Address 50E Street, SE

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	7	7

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

866.36

Purpose of Disbursement
Stationery and envelopes

001

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Eric Redd's Golf Event Company

Transaction ID: 1184850118464
Date of Disbursement

Mailing Address 74-430 Abronia Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	7	7

City Palm Desert State CA Zip Code 92260

Amount of Each Disbursement this Period

122.39

Purpose of Disbursement
Items for fundraiser

007

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1488.75

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: 1185884499031 Date of Disbursement
	Mailing Address PO Box 1140	<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping Candidate Name	<input type="text" value="628.55"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: <input type="text" value="001"/>

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: 1188398047167 Date of Disbursement
	Mailing Address PO Box 1140	<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping Candidate Name	<input type="text" value="297.51"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: <input type="text" value="001"/>

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: 1190990419641 Date of Disbursement
	Mailing Address PO Box 1140	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping Candidate Name	<input type="text" value="535.13"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: <input type="text" value="001"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1461.19"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) GE Capital <hr/> Mailing Address PO Box 31001 <hr/> City Pasadena State CA Zip Code 91110 <hr/> Purpose of Disbursement Coping/faxing services Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1184850255318 Date of Disbursement 07 / 18 / 2007 <hr/> Amount of Each Disbursement this Period 213.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) GE Capital <hr/> Mailing Address PO Box 642111 <hr/> City Pittsburgh State PA Zip Code 15264 <hr/> Purpose of Disbursement Coping/faxing services Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1185884556951 Date of Disbursement 07 / 27 / 2007 <hr/> Amount of Each Disbursement this Period 382.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) GE Capital <hr/> Mailing Address PO Box 31001 <hr/> City Pasadena State CA Zip Code 91110 <hr/> Purpose of Disbursement Coping/faxing services Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1190990603820 Date of Disbursement 09 / 27 / 2007 <hr/> Amount of Each Disbursement this Period 125.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	720.68
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Sabrina Garcia</p> <p>Mailing Address 81944 Villa Reale</p> <p>City Indio State CA Zip Code 92203</p> <p>Purpose of Disbursement Mileage reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1184071357295</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="704.98"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Sabrina Garcia</p> <p>Mailing Address 81944 Villa Reale</p> <p>City Indio State CA Zip Code 92203</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1185897144876</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3729.76"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sabrina Garcia</p> <p>Mailing Address 81944 Villa Reale</p> <p>City Indio State CA Zip Code 92203</p> <p>Purpose of Disbursement Mileage reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1188564972003</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="613.70"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5048.44

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Sabrina Garcia

Transaction ID: 1188919137839
Date of Disbursement

Mailing Address 81944 Villa Reale

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	0	7

City State Zip Code
Indio CA 92203

Amount of Each Disbursement this Period

3729.76

Purpose of Disbursement

001
Category/
Type

Salary
Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Sabrina Garcia

Transaction ID: 1191329681150
Date of Disbursement

Mailing Address 81944 Villa Reale

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

City State Zip Code
Indio CA 92203

Amount of Each Disbursement this Period

3729.76

Purpose of Disbursement

001
Category/
Type

Salary
Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Jivaldi LLC

Transaction ID: 1183490707903
Date of Disbursement

Mailing Address 2735 Eagles Landing Court

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

City State Zip Code
Dublin CA 94568

Amount of Each Disbursement this Period

737.50

Purpose of Disbursement
website hostage, usage, maintenance & up

001
Category/
Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

8197.02

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Jivaldi LLC Mailing Address 2735 Eagles Landing Court City Dublin State CA Zip Code 94568 Purpose of Disbursement website hostage, usage, maintenance & up Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1186494700993 Date of Disbursement 08 / 07 / 2007 Amount of Each Disbursement this Period 937.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Jivaldi LLC Mailing Address 2735 Eagles Landing Court City Dublin State CA Zip Code 94568 Purpose of Disbursement website hostage, usage, maintenance & up Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1188919696986 Date of Disbursement 09 / 04 / 2007 Amount of Each Disbursement this Period 687.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Sharon Lynch Mailing Address PO Box 5005 City Rancho Mirage State CA Zip Code 92270 Purpose of Disbursement refund Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1201718556869 Date of Disbursement 09 / 30 / 2007 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1875.00

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

SCHEDULE B (FEC Form 3) 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"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) McGrath's Catering <hr/> Mailing Address 4092 10th St <hr/> City Riverside State CA Zip Code 92501 <hr/> Purpose of Disbursement Food and Bev for event Candidate Name 007 Category/Type <hr/> 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: District:	Transaction ID: 1184850191164 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">610.40</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) National Federation of Republican Women <hr/> Mailing Address 124 N Alfred ST. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement membership advertising Candidate Name 004 Category/Type <hr/> 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: District:	Transaction ID: 1185997644028 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">650.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) O'Linn <hr/> Mailing Address 30423 Camwood St. #133 <hr/> City Agora Hills State CA Zip Code 91301 <hr/> Purpose of Disbursement Security alarm fees Candidate Name 001 Category/Type <hr/> 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: District:	Transaction ID: 1184850990837 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">75.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 2px; font-weight: bold;">1335.40</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

SCHEDULE B (FEC Form 3) 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"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Palm Springs Florist Mailing Address 894 N Palm Canyon DR City Palm Springs State CA Zip Code 92262 Purpose of Disbursement Flowers for an event Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1188233659008 Date of Disbursement 08 / 16 / 2007 Amount of Each Disbursement this Period 123.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 3642 City Culver City State CA Zip Code 90231-3642 Purpose of Disbursement Payroll Services Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1183402912292 Date of Disbursement 07 / 02 / 2007 Amount of Each Disbursement this Period 81.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 2950 City Merrifield State VA Zip Code 22116 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1185897245357 Date of Disbursement 07 / 31 / 2007 Amount of Each Disbursement this Period 1383.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1589.49

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 1185973135882
	Mailing Address PO Box 2950	Date of Disbursement 07 / 31 / 2007
	City Merrifield State VA Zip Code 22116	Amount of Each Disbursement this Period 92.91
	Purpose of Disbursement Payroll Services Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 1188919271677
	Mailing Address PO Box 2950	Date of Disbursement 08 / 30 / 2007
	City Merrifield State VA Zip Code 22116	Amount of Each Disbursement this Period 1383.62
	Purpose of Disbursement Payroll Taxes Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 1189009812459
	Mailing Address PO Box 2950	Date of Disbursement 09 / 05 / 2007
	City Merrifield State VA Zip Code 22116	Amount of Each Disbursement this Period 81.96
	Purpose of Disbursement Payroll Services Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	1558.49
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 2950 City Merrifield State VA Zip Code 22116 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1191329995855 Date of Disbursement 09 / 28 / 2007 Amount of Each Disbursement this Period 1383.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Pitney Bowes Inc. Mailing Address 1201 Market Street City Wilmington State DE Zip Code 19801 Purpose of Disbursement Postage Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1185825092621 Date of Disbursement 07 / 27 / 2007 Amount of Each Disbursement this Period 1739.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Pitney Bowes Inc. Mailing Address 1201 Market Street City Wilmington State DE Zip Code 19801 Purpose of Disbursement Postage Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1185884366255 Date of Disbursement 07 / 27 / 2007 Amount of Each Disbursement this Period 759.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3882.68

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Plaza Del Sol Mailing Address 1555 S. Palm Canyon Drive Suite G106 City Palm Springs State CA Zip Code 92264 Purpose of Disbursement Monthly office rental Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1183382953169 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 665.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Plaza Del Sol Mailing Address 1555 S. Palm Canyon Drive Suite G106 City Palm Springs State CA Zip Code 92264 Purpose of Disbursement Monthly office rental Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 008" <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1186663993749 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 7 Amount of Each Disbursement this Period 665.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Plaza Del Sol Mailing Address 300 S Palm Canyon DR City Palm Springs State CA Zip Code 92264 Purpose of Disbursement Monthly office rental Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1188919594084 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 665.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1995.00

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Postmaster Mailing Address 333 E Amado Road City State Zip Code Palm Springs CA 92263 Purpose of Disbursement PO Box Candidate Name 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: District:	Transaction ID: 1184849874333 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 204.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Riverside County Treasurer Mailing Address 4080 Lemon Street, Fourth Floor City State Zip Code Riverside CA 92501 Purpose of Disbursement Property tax bill Candidate Name 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: District:	Transaction ID: 1184849631811 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 1019.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) SCM Associates Mailing Address 10 Main Street PO Box 720 City State Zip Code Jaffrey NH 03452 Purpose of Disbursement Printing/Shipping services Candidate Name 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: District:	Transaction ID: 1185973226331 Date of Disbursement 07 / 31 / 2007 Amount of Each Disbursement this Period 6889.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	8113.89
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SCM Associates</p> <p>Mailing Address 10 Main Street PO Box 720</p> <p>City Jaffrey State NH Zip Code 03452</p> <p>Purpose of Disbursement Printing/Shipping services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1188233716428</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4209.34"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SCM Associates</p> <p>Mailing Address 10 Main Street PO Box 720</p> <p>City Jaffrey State NH Zip Code 03452</p> <p>Purpose of Disbursement Printing/Shipping services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1188397951265</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3937.35"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SCM Associates</p> <p>Mailing Address 10 Main Street PO Box 720</p> <p>City Jaffrey State NH Zip Code 03452</p> <p>Purpose of Disbursement Printing/Shipping services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1189447661091</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5449.99"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

13596.68

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
SCM Associates

Transaction ID: 1190383943451
Date of Disbursement

Mailing Address 10 Main Street
PO Box 720

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

City Jaffrey State NH Zip Code 03452

Amount of Each Disbursement this Period

12133.05

Purpose of Disbursement
Printing/Shipping services

001

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
SCM Associates

Transaction ID: 1190990833716
Date of Disbursement

Mailing Address 10 Main Street
PO Box 720

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

City Jaffrey State NH Zip Code 03452

Amount of Each Disbursement this Period

1909.13

Purpose of Disbursement
Printing/Shipping services

001

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
St. Regis Resort Aspen

Transaction ID: 1186058975378
Date of Disbursement

Mailing Address 315 East Dean St.

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	0	7

City Aspen State CO Zip Code 81611

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Fundraiser deposit

007

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

16542.18

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Time Warner Cable Mailing Address 810 N farrell Drive City Palm Springs State CA Zip Code 92262-5998 Purpose of Disbursement Cable service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1184851125019 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 151.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Time Warner Cable Mailing Address 810 N farrell Drive City Palm Springs State CA Zip Code 92262-5998 Purpose of Disbursement Cable service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1188240059710 Date of Disbursement 08 / 16 / 2007 Amount of Each Disbursement this Period 151.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Time Warner Cable Mailing Address 41725 Cook Street City Palm Desert State CA Zip Code 92211-5100 Purpose of Disbursement Cable service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1190990479951 Date of Disbursement 09 / 27 / 2007 Amount of Each Disbursement this Period 151.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

453.54

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Toby Willaby	Transaction ID: 1186664095510 Date of Disbursement 08 / 08 / 2007
	Mailing Address 405 Onyx Drive	Amount of Each Disbursement this Period 725.00
	City Palm Springs State CA Zip Code 92264	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Graphic design service Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 007

B.	Full Name (Last, First, Middle Initial) Toby Willaby	Transaction ID: 1189173615332 Date of Disbursement 09 / 07 / 2007
	Mailing Address 405 Onyx Drive	Amount of Each Disbursement this Period 140.00
	City Palm Springs State CA Zip Code 92264	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Graphic design service Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

C.	Full Name (Last, First, Middle Initial) Toby Willaby	Transaction ID: 1190384099600 Date of Disbursement 09 / 20 / 2007
	Mailing Address 405 Onyx Drive	Amount of Each Disbursement this Period 400.00
	City Palm Springs State CA Zip Code 92264	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Graphic design service Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional)	▶	1265.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

<p>A. Full Name (Last, First, Middle Initial) Top of the Line Signs</p> <p>Mailing Address PO Box 179</p> <p>City La Quinta State CA Zip Code 92247</p> <p>Purpose of Disbursement Signs</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1189447397025</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2100.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Top of the Line Signs</p> <p>Mailing Address PO Box 179</p> <p>City La Quinta State CA Zip Code 92247</p> <p>Purpose of Disbursement Signs</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1190725768766</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1480.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Valley Office Equipment</p> <p>Mailing Address 36-665 Bankside Drive #B</p> <p>City Cathedral City State CA Zip Code 92234</p> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1185884632495</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.53"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3615.53

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Valley Office Equipment Mailing Address 36-665 Bankside Drive #B City Cathedral City State CA Zip Code 92234 Purpose of Disbursement Office supplies Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1188398110211 Date of Disbursement 08 / 28 / 2007 Amount of Each Disbursement this Period 35.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622 City Mission Hills State CA Zip Code 91346 Purpose of Disbursement Cell phone service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1184850540791 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 117.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622 City Mission Hills State CA Zip Code 91346 Purpose of Disbursement Cell phone service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1184850799235 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 146.69 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

299.41

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 1184850866138
	Mailing Address PO Box 9622	Date of Disbursement 07 / 18 / 2007
	City Mission Hills State CA Zip Code 91346	Amount of Each Disbursement this Period 60.75
	Purpose of Disbursement Cell phone serviceH Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 1185884755506
	Mailing Address PO Box 9622	Date of Disbursement 07 / 27 / 2007
	City Mission Hills State CA Zip Code 91346	Amount of Each Disbursement this Period 212.80
	Purpose of Disbursement Cell phone service Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 1186510322200
	Mailing Address PO Box 9622	Date of Disbursement 08 / 07 / 2007
	City Mission Hills State CA Zip Code 91346	Amount of Each Disbursement this Period 299.64
	Purpose of Disbursement Cell phone service Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	573.19
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 1188240242797
	Mailing Address PO Box 9622	Date of Disbursement 08 / 16 / 2007
	City Mission Hills State CA Zip Code 91346	Amount of Each Disbursement this Period 60.75
	Purpose of Disbursement Cell phone service Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 1189448085632
	Mailing Address PO Box 9622	Date of Disbursement 09 / 07 / 2007
	City Mission Hills State CA Zip Code 91346	Amount of Each Disbursement this Period 146.38
	Purpose of Disbursement Cell phone service Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 1189695035978
	Mailing Address PO Box 9622	Date of Disbursement 09 / 12 / 2007
	City Mission Hills State CA Zip Code 91346	Amount of Each Disbursement this Period 60.75
	Purpose of Disbursement Cell phone service Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	267.88
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.	Full Name (Last, First, Middle Initial) Verizon Mailing Address 1717 Arch Street 25th Floor City Philadelphia State PA Zip Code 19103 Purpose of Disbursement phone service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1184850914011 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 529.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Verizon Mailing Address 1717 Arch Street 25th Floor City Philadelphia State PA Zip Code 19103 Purpose of Disbursement phone service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1188240188034 Date of Disbursement 08 / 16 / 2007 Amount of Each Disbursement this Period 196.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Verizon Mailing Address 1717 Arch Street 25th Floor City Philadelphia State PA Zip Code 19103 Purpose of Disbursement phone service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1189694547187 Date of Disbursement 09 / 12 / 2007 Amount of Each Disbursement this Period 270.23 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

996.18

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Wescom Insurance Services

Transaction ID: 1187795044825
Date of Disbursement

Mailing Address PO Box 769

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	7	

City Downey State CA Zip Code 90241

Amount of Each Disbursement this Period

825.00

Purpose of Disbursement
Insurance renewal and policy/inspection
Candidate Name

001

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Williams & Jensen, PLLC

Transaction ID: 1188919815575
Date of Disbursement

Mailing Address 1155 21st Street NW Suite 300

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	7	

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

9561.52

Purpose of Disbursement
legal retainer
Candidate Name

001

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Wyndham Palm Springs

Transaction ID: 1190822338020
Date of Disbursement

Mailing Address 888 E. Tahquitz Canyon Way

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	7	

City Palm Springs State CA Zip Code 92262

Amount of Each Disbursement this Period

4005.60

Purpose of Disbursement
Event Food/Bev, Audio
Candidate Name

007

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

14392.12

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 90 / 91

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)
Wyndham Palm Springs

Transaction ID: 1190832976938
Date of Disbursement

Mailing Address 888 E. Tahquitz Canyon Way

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	7

City State Zip Code
Palm Springs CA 92262

Amount of Each Disbursement this Period

396.31

Purpose of Disbursement

007
Category/
Type

Event Food/Bev

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Yellow Pages

Transaction ID: 1188304208414
Date of Disbursement

Mailing Address PO Box 3370

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

City State Zip Code
Palm Springs CA 92263

Amount of Each Disbursement this Period

27.50

Purpose of Disbursement

001
Category/
Type

web page ad

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

423.81

TOTAL This Period (last page this line number only)

122506.87

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mary Bono Mack Committee

A. Full Name (Last, First, Middle Initial) Citizens for Andal Mailing Address 2339 West Hammer Lane #C PMB 143 City Stockton State CA Zip Code 95209 Purpose of Disbursement Political contribution Candidate Name Dean Andal Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1183392578608 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. Full Name (Last, First, Middle Initial) Rudy Giuliani Presidential Committee Mailing Address 1585 BROADWAY City New York State NY Zip Code 10036 Purpose of Disbursement in-kind: email to campaign list Candidate Name Rudolph Giuliani Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NY District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1192505157749 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 7
	Amount of Each Disbursement this Period 360.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

1360.00

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

1360.00